



School of Education
Licensure Office
Post Office Box 1510
Pembroke, NC 28372
910.521.6879

***Proof Of Intent
School of Education
Lateral Entry/Licensure Only***

Name: _____ Social Security Number: _____ - _____ - _____

Address: _____

Current Phone #: _____ Current Semester: _____

Seeking Certification/Licensure Area: _____

This statement is to be used as proof of a student's intent to pursue the Teacher Licensure/Certification Program at UNC Pembroke. Completion of this form does not guarantee acceptance into the Teacher Education Program.

Nuekie Aku Opata – Licensure Officer

Date

PLEASE NOTE:

This form is designed for Lateral Entry/Licensure Only students seeking certification *only*. Students completing this form should have a Plan of Study, Individualized Education Program (IEP), or an In-Focus Plan of Study developed by the School of Education.

The Licensure Office is located in the School of Education, Room 101A. When Ms. Opata has signed the form, please forward the completed document to the Financial Aid Office.

Students obtaining licensure/certification through the RALC cannot receive Financial Aid