

**Non-licensure Declaration**

|  |  |  |
| --- | --- | --- |
| Name: Click here to enter text. | Banner ID: Click here to enter text. | Telephone:Click here to enter text. |
| Address: Click here to enter text. |  | Email Address:Click here to enter text. |
| Degree Program: Click here to enter text. | Program Name: Click here to enter text. |  |

I understand that I am seeking the above-named degree from The Graduate School at the University of North Carolina at Pembroke for reasons other than teacher licensure by the Department of Public Instruction of the State of North Carolina.

Accordingly, I understand that, upon completion of all requirements for this degree, I will not be recommended for any teacher licensure.

Submit this form using your BraveMail to grad@uncp.edu which will serve as your digital signature.

***\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\****

**OFFICE USE**

Processed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_