

## SCHOOL OF EDUCATION and ALLIED STUDIES

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Students may submit requests for college recommendation to the *Licensure Office, School of Education and Allied Studies, Hart Hall 124 Bridgewater State College, Bridgewater MA 02325* on or before the deadline closest to their degree conferral or program completion date. (Deadline dates – May 15, August 15 or December 15.)

### Request for Bridgewater State College Recommendation

*Last Name:* \_\_\_\_\_ *First Name:* \_\_\_\_\_

*Address:* \_\_\_\_\_ *Tel. Number:* \_\_\_\_\_  
 \_\_\_\_\_ *E-mail:* \_\_\_\_\_

*Student I.D. #:* \_\_\_\_\_ *D.O.B.:* \_\_\_\_\_

**Educator Preparation Program:** (check one)

*Undergraduate* \_\_\_\_\_ *Degree Conferral Date* \_\_\_\_\_  
*Pbac/APB* \_\_\_\_\_ *Program Completion Date* \_\_\_\_\_  
*M.Ed./MAT* \_\_\_\_\_ *Degree Conferral Date* \_\_\_\_\_  
*CAGS* \_\_\_\_\_ *Program Completion Date* \_\_\_\_\_

<i>License Area</i>	<i>Field Code</i>	<i>Level</i>	<i>Stage</i>
			<i>Initial or Professional</i>

**Please note: This is not your application for educator licensure.** Applications for licensure are filed on-line through the Department of Education ELAR system @ [www.doe.mass.edu/educators](http://www.doe.mass.edu/educators). It is the responsibility of the student to submit all paperwork (including final official transcripts) required to complete their application at the D.O.E.

*Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_

For office use only:

<i>BSC Recommendation</i>	<i>Date</i>	<i>Field</i>	<i>Level</i>	<i>Stage</i>
<i>Yes/No</i>				<i>Initial/Professional</i>