

# Request to Graduate Without Recommendation for Teacher Licensure

## STEP 1: Your Information

I hereby request permission to graduate without completing the Teacher Education Program. I understand that I will not be eligible for UTC's recommendation for teacher licensure. I further understand that if I should reenter UTC's Teacher Education Program at some future date, my credentials will be evaluated in terms of the current program requirements at the time of reentry.

Name: \_\_\_\_\_ UTC ID: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Degree/Major: \_\_\_\_\_

Requested Date of Graduation: \_\_\_\_\_ Expected earned hours as of graduation date: \_\_\_\_\_

Brief explanation of reason for graduating without licensure: \_\_\_\_\_

### Even though you plan on graduating without licensure, you must apply to UTC to graduate.

UTC Graduation Applications must be submitted by the priority deadline which is typically in the middle of the semester prior to graduation. Penalties such as a \$50 late fee or delayed graduation may apply for applications submitted after this deadline.

Course(s) for which waiver is requested: \_\_\_\_\_

## Step 2: Complete the Following Survey

Link and QR code both lead to the same survey.

[https://utk.co1.qualtrics.com/jfe/form/SV\\_6EXCoUs105XwH10](https://utk.co1.qualtrics.com/jfe/form/SV_6EXCoUs105XwH10)



\_\_\_\_\_ Your initials, indicating that you have completed the survey in its entirety.

## Step 3: Advisor Review

Residency II, Seminar, and/or EDUC 4335 are the only classes that may be waived.

Students with 33 hours or more remaining toward their major may not be granted permission to graduate without licensure and will instead be recommended for a change in major.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Academic Advisor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I have verified that this student is eligible for graduation without licensure

**STEP 4:** Send form to [certification@utc.edu](mailto:certification@utc.edu) for review and signatures.

SOE Director Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Teacher Certification Officer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Step 5: The Certification Officer will send the completed form to the Office of the Registrar.**