

Application for State Approval of Teacher Preparation Specialty Programs

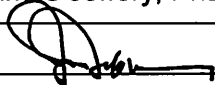
Michigan Department of Education, Office of Professional Preparation Services

P.O. Box 30008, Lansing, Michigan 48909

Phone: (517) 335-4610 * Fax: (517) 373-0542**

Directions:

- For each new, amended, or experimental program, a separate application is required.
- Application and all documentation are to be submitted electronically.
- Fax or mail only the cover page (Page 1) that is signed by the dean or director.
- All correspondence regarding this application should be addressed to the appropriate consultant identified in Attachment 1.

I. Application Information	
Institution	Andrews University
MDE Endorsement Area and Code (Attachment 2)	History, code CC
Date of this Application	11/01/10
Name and Title of Dean/Director	James Jeffery, PhD
Signature of Dean/Director	

II. Contact Information for Questions Related to This Application	
Contact Person's Name and Title	Brian Strayer, Professor of History
Contact Person's Phone Number	269-471-3612
Contact Person's Fax Number	269-471-6540
Contact Person's E-Mail Address	bstrayer@andrews.edu

III. Type of Request for Approval	(Indicate One)
New program for institution	
U.S. Department of Education Classification of Instructional Programs (CIP) Code, if vocational occupational area	
Compliance with State Board of Education new or modified program criteria	x
Experimental program	
Program amendment (See Section IX for guidelines)	