

## **Recommend for Online Credential**

Name of Applicant:	First/Last	CSUN ID:
Admit Term:	Program Plan:	CSUN Email:
Pathway:	Credential Title:	Credential Term:
Subject/Specialty A	rea:	Authorization:
Added Authorizatio	n:	
Program Completion	on: Issua	nce Date:
Basic Skills:M	et Not Met Options: _	Date:
Subject Matter:	_ Met Not Met	
CSET:	Dates:	
Program:	Name of II	HE:
Academic Majo	or:	Other:
		edTPAIDP Program Plan ILF
<b>BA Degree Awarded</b>	d: Yes No Major	IHE
Intern Employment I	District:	-
Overall GPA:	<b>Professional Ed GPA</b>	:
<b>Attachments to CTC</b>	C online: Degree Transcr	ipts BSR edTPA RICA
Comments:		
Evaluator Name:	Σ	Date: