

## RECOMMENDATION FORM (41-REC 2042) Multiple and Single Subject Only

This form is to be completed by a college or university with a Commission-accredited SB 2042 Teacher Preparation Program. Submit it to the CTC with the 41-4 application form, appropriate fees, and supporting documentation.

Recommending Institu	ution				
Name of Applicant	First	Middle		SSN:	
Type of Credential					
Subject Matter Autho	rization(s)				
Supplementary Autho	rization(s)				
Term of Credential	Intern	Preliminary		Clear	
Additional Biling	gual Authorization				
			Language		
			CDS Code:		
As the authorized re		ommending authority,	I have review	red the applicant's credential	
Baccalaureat Basic Skills Course v Subject Matt	te or higher degree Requirement* vork Examinatio er Preparation* Subje	Exams/Courses:			
Reading Inst	ruction Competence Ass	essment (RICA) for Mu	ultiple Subject		
	ution course #			(Ontional)	
-	e requirements checked b			Date Passed	
Fifth Year of Study			Advanced Computer Education		
Advanced Health Education			Advanced English Learner (effective 7-1-05)		
Advanced Special Education Signature			Date		
Name and Title					
			Email Address		
* Select more than one	if using a combination of a	options to meet the require	ement.		