

Dear PBS-CARES Applicant:

We are pleased that you are interested in applying for this master's degree program focusing on **positive behavior support for students with low-incidence disabilities**. Attached is an application for you to complete. Please note, this application does not substitute for formal application to NAU's graduate college. If you are accepted into this program, you must also submit an applications to the NAU Graduate College Special Education (M.Ed.) with Teacher Certification program. If you are accepted into the NAU Graduate College, AND if you are approved for the PBS-CARES scholarship, you will automatically be enrolled in the Positive Behavior Support Certificate program as well. To apply to the Graduate College go to <http://home.nau.edu/gradcoll> . To learn more about the PBS Certificate program go to <http://www.nau.edu/ihd/positive/graduatecertif.shtml> .

To qualify for this project, you must: 1) be a US citizen; 2) be at a graduate level; and 3) intend to provide services to school-aged children with severe disabilities and challenging behavior.

Please list as *references*, and collect letters of support from, school administrators who are willing to commit to your pursuit of this program and who are willing to hire you once you have completed this program of studies.

In addition to the application, please submit a *cover letter* detailing the following:

- Your educational background and what credentials you currently hold as well as any credentials for which you would be eligible at this time (see <http://www.ade.az.gov/asd/hqtp/>). If you are close to completing a credential, please indicate what you must still complete.
- The reason for your interest in PBS-CARES, and your future plans once you have completed the program of studies.
- Your personal beliefs regarding the discipline of students with challenging behavior, and why you want to learn about positive behavior support.
- Any background experiences (personal and professional) and perspectives that you would bring to this program.
- Description of experiences working with individuals who have severe disabilities.
- Your experience with online classes, and likelihood of success with this program.
- Attach copies of *transcripts* (note: the Graduate College requires official transcripts. Unofficial copies are acceptable to submit with this application).

Deadline for submission of all application material is May 15 (for fall), and November 15 (for spring). All material must be received by this date and no late submissions will be considered. Selection and notifications of scholars will be made by June and December. Please note – you must be accepted to the NAU Graduate College (Special Education (M.Ed.) with Teacher Certification program) by these dates as well.

If you require additional information or need assistance with the application process, please contact:
daniel.davidson@nau.edu.

Completed application materials (including cover letter, references and informal transcripts) should be sent to:

Dr. Daniel Davidson
Institute for Human Development
P.O. Box 5630
Northern Arizona University
Flagstaff, AZ 86011

Fax: 928-523-9127

Sincerely,

Daniel Davidson, Ph.D. BCBA
PBS-CARES Project Director



APPLICATION

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ E-mail Address: _____

Academic

Year

Applying

for:

Social Security No.: _____

Are you a citizen of the United States? YES NO Are you currently a graduate student? YES NO

If yes, in what areas are/were you certified to teach? _____

Do you possess a current teaching credential? YES NO

If no, what is necessary for you to complete a credential? _____

Education

(Attach copies of transcripts from each university listed)

University Attended: _____ University Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

University Attended: _____ University Address: _____

From: _____ To: _____ Did you graduate? YES NO Degree: _____

Professional References

(list references who can share information about your academic and/or professional qualities)

Please list three references.

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Full Name: _____ Relationship: _____

Company: _____ Phone: _____

Address: _____

Current Employment (Attach a current resume/vita)

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____
From: _____ May we contact your supervisor for a reference? YES NO

Previous RELATED Employment (Attach a current resume/vita)

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO

Company: _____ Phone: _____
Address: _____ Supervisor: _____
Job Title: _____
Responsibilities: _____
From: _____ To: _____ Reason for Leaving: _____
May we contact your previous supervisor for a reference? YES NO

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____

** PBS-CARES is a collaborative effort between NAU's Institute for Human Development and College of Education*