Jim and Judy Watson COE Student Services Program Admissions 5500 University Parkway San Bernardino, CA 92407 http://coe.csusb.edu/studentServices/index.html



Adapted Physical Education Added Authorization Program Admissions File (P.A.F.) Requirements

Listed below are the requirements you will need to submit to apply to the Adapted Physical Education Added Authorization Program.

- 1. You must complete the online University Application and submit official transcripts from each institution attended (with the exception of California State University, San Bernardino) to the Graduate Admissions Office by the deadline for that quarter. Note: These transcripts must have a current date, not to exceed one year.
- 2. Program Admissions Application.
- 3. Advising Form You will obtain this form from the Coordinator for the Adapted Physical Education Program Dr. Hyun-Kyong Oh, (909) 537-3535, HP 212.
- 4. Official Transcripts You will need to submit an official transcript from each institution attended with the exception of California State University, San Bernardino. Please note: This is in addition to transcripts you may have submitted to the University.
- 5. Verification of Basic Teaching Credential You will need to submit a copy of your basic teaching credential.
- 6. GPA You must have a cumulative GPA of a 2.67 or your last 90 units GPA of a 2.75 in order to be admitted to the Special Education Credential Program.
- 7. \$35 Program Admissions Filing Fee This fee must be paid either on-line through MyCoyote or in person at the Bursar Office. Please note, that if you pay this in person at the Bursar Office you will be required to show them a Fee Receipt.

ADAPTED PE ADDED AUTH PAF REQ REVISED 09/17/13



PROGRAM ADMISSIONS APPLICATION

Student ID #:	Applying for (Quarter/Year):		
Name: Last, First, Middle Initial			
Home Phone:			
Cell Phone:	Birthdate:		
Ethnicity (optional):	Gender:		
Email Address:			
Please indicate which program you are applying for			
Program:			
Subject Area (Single Subject only):			
Option:			
Added Authorizations:			
Degree Information:			
University where Bachelor's Degree was/will be granted:			
Academic Major:			
Date of degree or anticipated date of completion:			
List of all colleges/universities you have attended:			
My signature below confirms that each of the program requirements for admissions has been completed to the best of my knowledge.			
Student's Signature	Date		

Jim and Judy Watson COE Student Services Program Admissions (CE 102) 5500 University Parkway San Bernardino, CA 92407-2393 http://coe.csusb.edu/forms/index.html



FEE RECEIPT

The CSUSB non-refundable processing fee may be paid using one of the following payment methods or additional options may be located at the Bursar website at http://admnacct.csusb.edu/bursar.htm.

- 1. Submit a completed *Fee Receipt* directly to the Bursar (UH-35) with payment (*cash, check, money order, traveler's check, cashier's check or pin based ATM are acceptable*). NOTE: The *Fee Receipt* (stamped by the Bursar) will need to be submitted to Program Admissions with your Program Admission File.
- 2. Pay on-line via MyCoyote with an electronic check or credit card (2.9% convenience fee) via *American Express*, *Discover and Mastercard accepted (Visa is not accepted)*.

MyCoyote Payment Instructions:

- Sign in to your MyCoyote account via the CSUSB home page at http://www.csusb.edu (Coyote ID & password required)
- Select SB Make Payments
- Select Pay Fees via eCheck or Credit Card
- Select Make Payment
- Select Program Admissions File Fee
- Select Add to Basket
- Select Checkout and make your payment option

NOTE: A copy of the MyCoyote confirmation page and a complete *Fee Receipt* will need to be submitted with your Program Admission File.

PERSONAL INFORMATION			
Student Identification Number:			
Last Name, First Name, M.I.			
,			
Address, City, State, Zip			
11441 655, 6167, 51416, 214			
Home Phone:	Work Phone:	Cell Phone:	
Trome Thome.	Work I none.	Con I none.	
CSUSB Email Address:			
CS CSB Email Flacioss.			
SERVICE FEE			
Select the SERVICE for which you a	are applying:		
OFFICE LIGE ONLY. DC# 501000	DT011 C0720 5000 OC# 716	DECEMED DV	
OFFICE USE ONLY: PS#: 501899-	-RT011-C0720-5000 QC#: 716	RECEIVED BY:	