



www.kytraineeship.org

Part B

(To be completed by first-time applicants only, returning applicants when changes occur in your employment status/certification program.)

Return Application to:

Special Education Traineeship Program
245 Johns Hill Road
Highland Heights, KY 41099

Name: _____
(Last) (First) (Middle Initial)

EDUCATION:

Degree(s) Earned beginning with B.A. or B.S.	University	Major
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

Required Documents that must be enclosed with this application:

- A copy of your curriculum contract or program of study plan, **SIGNED** by your University Advisor.
- A copy of your current teaching certificate.
- Completed and **SIGNED** application Part A and B.

My signature indicates that I understand that the following are my responsibilities and failure to comply will affect my ability to receive future funding:

- Grades must be submitted by the due date listed on the kytraineeship.org website.
- Notify the Traineeship in writing (email) immediately if you have dropped a funded course.
- Notify us in writing (email) if you would like to change a class for which you have already applied. The change must be approved for funding.
- Traineeship must receive a copy of your current certificate (Emergency, Probationary, or Temporary Provisional) in a timely manner.

Applicant Signature _____

Date _____