

## Statement of Goals: Post Baccalaureate Certificate

Applicant Name (First and Last Name): \_\_\_\_\_

Applicant Email: \_\_\_\_

Intended Area of Interest:

English for Speakers of Other Languages (ESOL) Endorsement

Reading Endorsement

**Special Educator (SPED) Endorsement** 

Directions: Complete the following prompt and return to the Graduate School either via email as a saved .pdf attachment to gradschl@up.edu or as a printed document via mail to the address listed above in the right hand corner. Please be sure this completed form is included in your email or mail. For any program specific questions, please contact Anne Rasmussen via email at <u>rasmusse@up.edu</u> or by phone at 503.943.8257.

Please provide a narrative statement of your academic and/or professional goals. The importance of your intended area of interest in the pursuit of these goals should also be made clear.