



MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION
 DIVISION OF LEARNING SERVICES-OFFICE OF COLLEGE AND CAREER READINESS

NEW COUNSELOR INSTITUTE (NCI) REGISTRATION FORM

INSTRUCTIONS

New Counselor Institute (NCI) is designed for those entering school counseling positions with:

- * A Temporary Authorization Certificate
- * An Alternative Certification with no or one year of school counseling experience
- * Recent graduation from a school counseling master's program and no counseling experience
- * No public school experience

Priorities for acceptance will be based on the bulleted list above. Local administrative approval is required

DATE: July 17-20, 2016

LOCATION: Capital Plaza Hotel, Jefferson City

MAIL OR FAX COMPLETED REGISTRATION FORMS TO:

Missouri Department of Elementary and Secondary Education
 Office of College and Career Readiness/New Counselor Institute (NCI)
 P. O. Box 480
 Jefferson City MO 65102-0480

PHONE (573) 751-4383

FAX (573) 526-7861

REGISTRATION FORMS ARE DUE BY JULY 1. Registration will be subject to availability after July 1.

PERSONAL CONTACT INFORMATION

NAME:

HOME MAILING ADDRESS:

CITY:

STATE:

ZIP:

HOME PHONE:

CELL PHONE:

EMAIL ADDRESS:

SCHOOL INFORMATION

SCHOOL NAME: (Where registrant will be working)

SCHOOL MAILING ADDRESS:

CITY:

STATE:

ZIP:

SCHOOL PHONE:

SCHOOL FAX:

The Department of Elementary and Secondary Education does not discriminate on the basis of race, color, religion, gender, national origin, age, or disability in its programs and activities. Inquiries related to Department programs and to the location of services, activities, and facilities that are accessible by person with disabilities may be directed to the Jefferson State Office Building, Office of the General Counsel, Coordinator - Civil Rights Compliance (Title VI/Title IX/504/ADA/Age Act), 6th Floor, Jefferson Street, P.O. Box 480, Jefferson City, MO 65102-0480; telephone number 573-526-4757 or TTY 800-735-2966; email civilrights@dese.mo.gov

GRADE LEVEL ASSIGNMENT FOR THE ____ / ____ SCHOOL YEAR?

- ELEMENTARY (Grades K-6)
- MIDDLE SCHOOL (Grades 6-8)
- HIGH SCHOOL (Grades 9-12)
- SECONDARY (Grades 7-12)
- K-12
- AREA CAREER CENTER

* Information is used to determine grade level table assignments.

GENERAL INFORMATION

TYPE OF COUNSELING CERTIFICATION:

- TEMPORARY AUTHORIZATION CERTIFICATION
- PROVISIONAL CERTIFICATION WITH JOB SECURED
- INITIAL CERTIFICATION
- OTHER _____

PREVIOUSLY SERVED AS A SCHOOL COUNSELOR?

- YES
- NO

IF YES, INDICATE GRADE LEVEL:

DOES THE REGISTRANT POSSESS A CURRENT MISSOURI EDUCATOR CERTIFICATE?

- YES
- NO

IF YES, INDICATE THE TYPE:

IF NO, PLEASE REVIEW *EDUCATOR CERTIFICATION*: <http://dese.mo.gov/educator-quality/certification>

DOES THE REGISTRANT HAVE PRIOR TEACHING EXPERIENCE?

- YES
- NO

IF YES, INDICATE GRADE LEVEL/SUBJECT AND YEARS:

SPECIAL DIETARY NEEDS:

I UNDERSTAND THAT A \$25.00 NONREFUNDABLE REGISTRATION FEE IS REQUIRED WITH EACH APPLICATION.

MY SIGNATURE BELOW INDICATES I AM COMMITTED TO ATTEND AND COMPLETE NEW COUNSELOR INSTITUTE.

SIGNATURE OF REGISTRANT

DATE

SIGNATURE OF ADMINISTRATOR

DATE

(e.g. Area Career Center Director/Community College Dean/Principal)

ADMINISTRATOR EMAIL ADDRESS:

ADMINISTRATOR WORK NUMBER:

SUMMER PHONE NUMBER: