**Master of Art in Teaching**

**(MAT)**

**APPLICATION SURVEY**

***No information provided on the survey will influence your admission into the alternative certification program.***

Plan to enroll: Summer I 20\_\_\_\_\_\_\_\_\_

Please select all areas you are interested in teaching.

Elementary ED: Inclusive Grades 1-5 Secondary ED: Inclusive Grades 6-12

Did you attend an information session? Yes No

If yes, how helpful did you find it in terms of providing information about the program?

Very helpful Helpful A little helpful Not at all helpful

If yes, how helpful did you find it in terms of encouraging you to apply?

Very helpful Helpful A little helpful Not at all helpful

How did you first hear about the GSU Alternative certification program? Please select the category and source. If you check “Other” for category or source, please elaborate in the space provided.

|  |  |
| --- | --- |
| **Category** | **Source** |
| General/Internet | ATCP Website Monster Search Engine Other |
| Newspaper/ Magazine Story | Ruston Leader News Star Other |
| Television News Story | KNOE KARD KTVE KAQY Other |
| Radio Ad/ Story | KGRM |
| Flyer/Brochure | Where did you see it? |
| Referral | Friend/Family Current alternative certification teacher  School District Personnel Teacher/Personal  GSU faculty or staff Other |
| E-mail | Mass email Organization email  Other |
| Mail | Organization Newsletter GSU alumni mailing  Information packet |
| Presentation at meeting | What organization? (Please specify name and location) |
| Other | Source: |

Rev. 10/16