

*The University of Tennessee at Chattanooga*  
College of Health, Education and Professional Studies  
*Teacher Education Program*

## Transitional License Professional Teaching Course Registration Form

<b>Please indicate which course you want to register for:</b> _____ EDUC 4830 (undergraduate) or _____ EDUC 5960 (graduate) Semester: _____ Year: _____	
Name: (last, first, middle)	
UTC ID:	UTC Email Address:
Phone Number:	Alternate Phone:
School System where you are currently employed:	
Name of School:	
School Address:	
School Phone Number:	
Grade Level Teaching:	Subject Teaching:
Date Hired:	
If this is your second semester of Professional Teaching, who was your previous PIR?	
Please initial next to each statement to indicate that you understand: _____ <i>Enrollment in Professional Teaching Experience is required the first two semesters that you are teaching on a Transitional License (a total of 6 credit hours). Please refer to your Program of Study.</i> _____ <i>This course is kept closed, so this form must be completed both semesters and returned to the Certification Officer (<a href="mailto:Avalon-Gourlay@utc.edu">Avalon-Gourlay@utc.edu</a> or Hunter 312G). Once this form is received, the course will be opened for you to register using the Advisement Pin provided to you by your advisor.</i> _____ <b><i>Within the first week of the semester you will need to log into UTC Learn. Please make sure that you are checking your UTC email for instructions.</i></b> _____ <i>During Professional Teaching Experience, a Professor in Residence (PIR) will arrange a time with you to conduct observations. Please make sure that you check your UTC email daily and that you are able to receive voicemails.</i>	
Signature:	Date: