

Multiple Subject Credential Program Application

Date of Application: _____ Have you applied to Cal State Apply Yes N/A
 Intended Program Start Date: Fall 20____ Spring 20____ Summer 20____

Student Information

_____ Last Name	_____ First Name	_____ Former Name (If applicable)	_____ Student ID
_____ Undergraduate Degree	_____ Institution	_____ Graduated or Anticipated Graduation Semester/Year	
_____ Master's Degree	_____ Institution	_____ Graduated or Anticipated Graduation Semester/Year	

Program Information

SELECT PROGRAM:

- Multiple Subject General Program
- Multiple Subject and Education Specialist (Dual)
 - Mild/Moderate or Moderate/Severe
- Multiple Subject - Early Childhood Education (ECE)
(Spring semester start only)
- Dual ECE Program (MS, ECE, and SPED)
 - Mild/Moderate or Moderate/Severe
(Spring semester start only)
- Multiple Subject - Deaf Education

SELECT OPTIONS THAT APPLY:

- Bilingual Authorization Program (BAP)
 - Hmong or Spanish
 - Concurrently with Liberal Studies Degree Coursework
 - Accepted to Fresno Unified Teacher Residency Program
- Are you a Mini Corp Student? Yes No

Admission Requirements

Forms

1. MS Credential Program Application
2. Admission Interview *with Typed Responses*
3. Advising
4. Subject Matter Proficiency/CSET
5. Medical Clearance

Letters

6. Two Letters of Recommendation

Verifications

7. Applied to Cal State Apply (see admission requirements for exceptions)
8. Basic Skills
9. Certificate of Clearance
10. Pre-Program Field Experience: Course Waiver

For Office Use Only

1. 2. 3. 4. 5. 6. 7. 8. 9. 10. U.S. Constitution
 CBEST: _____ R _____ M _____ W _____ Other Basic Skill _____
 GPA: _____ Cum _____ 60 units CSET: 101 _____ 102 _____ 103 _____ Coursework
 Admitted _____ Denied _____

 Credential Admissions Analyst Signature



Admission Interview Form

Last Name_____
First Name_____
Former Name (If applicable)_____
Student ID

Section I (Applicant)

Please complete this section prior to your interview on a separate typed 1-2 page document:

- Describe the characteristics of the best teacher you ever had.
- Refer to the list of Professional Dispositions and describe the dispositions you have that make you a strong candidate for the teaching profession? In what teaching areas will you need support?
 Collaboration Professional Ethics
 Critical Thinking Valuing Diversity
 Reflective Practitioner Life-long Learning
- How will you want your students to remember you?

Section II (Interviewer)

Interviewer will complete this section during interview:

Meets English speaking competency: YES NO

Meets suitability for teaching requirement: YES NO

Contact the Multiple Subject Coordinator for a second interview.

Faculty Signature_____
Date

Faculty Comments:

Interview Referrals:

Writing Center (278-0334)

Students with Disabilities Support (278-2811)

Speech and Hearing: Accent Reduction Services (278-2422)

Health and Psychological Services (278-2734)



School Staff and Volunteers: Tuberculosis Risk Assessment



Job-related requirement for child care, pre-K, K-12, and community colleges

The purpose of this tool is to identify **adults** with infectious tuberculosis (TB) to prevent them from spreading TB. Use of this risk assessment is required in the California Education Code, Sections 49406 and 87408.6 and the California Health and Safety Code, Sections 1597.055 and 121525, 121545, and 121555.

The law requires that a health care provider administer this risk assessment. A health care provider, as defined for this purpose, is any organization, facility, institution or person licensed, certified or otherwise authorized or permitted by state law to deliver or furnish health services. Any person administering this risk assessment is to have training in the purpose and significance of the risk assessment and Certificate of Completion.

Name of Employee/Volunteer Assessed for TB Risk Factors: _____

Assessment Date: _____ Date of Birth: _____

History of Tuberculosis Infection or Disease (Check appropriate box below)

Yes

If there is a documented history of positive TB test (infection) or TB disease, then a symptom review and chest x-ray (if none performed in previous 6 months) should be performed at initial hire by a physician, physician assistant, or nurse practitioner. Once a person has a documented positive test for TB infection that has been followed by an x-ray, and was determined to be free of infectious TB, the TB risk assessment (and repeat x-rays) is no longer required. If an employee or volunteer becomes symptomatic for TB, then he/she should seek care from his/her health care provider.

No (Assess for Risk Factors for Tuberculosis using box below)

Risk Factors for Tuberculosis (Check appropriate boxes below)

If any of the 5 boxes below are checked, perform a Mantoux tuberculin skin test (TST) or Interferon Gamma Release Assay (IGRA). Re-testing with TST or IGRA should only be done in persons who previously tested negative, and have new risk factors since the last assessment. A positive TST or IGRA should be followed by a chest x-ray, and if normal, treatment for TB infection considered. (Centers for Disease Control and Prevention [CDC]. *Latent Tuberculosis Infection: A Guide for Primary Health Care Providers*. 2013)

One or more signs and symptoms of TB: prolonged cough, coughing up blood, fever, night sweats, weight loss, excessive fatigue.

Evaluate for active TB disease with a TST or IGRA, chest x-ray, symptom screen, and if indicated, sputum acid-fast bacilli (AFB) smears, cultures and nucleic acid amplification testing. A negative TST or IGRA does not rule out active TB disease.

Close contact to someone with infectious TB disease at any time

Foreign-born person from a country with an elevated TB rate
Includes any country other than the United States, Canada, Australia, New Zealand, or a country in western or northern Europe. IGRA is preferred over TST for foreign-born persons.

Consecutive travel or residence of ≥1 month in a country with an elevated TB rate
Includes any country other than the United States, Canada, Australia, New Zealand, or a country in western or northern Europe.

Volunteered, worked or lived in a **correctional or homeless** facility



School Staff & Volunteers: Tuberculosis Risk Assessment User Guide



Job-related requirement for child care, pre-K, K-12, and community colleges

Background

California law requires that school staff working with children and community college students be free of infectious tuberculosis (TB). These updated laws reflect current federal Centers for Disease Control and Prevention (CDC) recommendations for targeted TB testing. Enacted laws, **AB 1667**, effective on January 1, 2015, **SB 792** on September 1, 2016, and **SB 1038** on January 1, 2017, require a tuberculosis (TB) risk assessment be administered and if risk factors are identified, a TB test and examination be performed by a health care provider to determine that the person is free of infectious tuberculosis. The use of the TB risk assessment and the Certificate of Completion, developed by the California Department of Public Health (CDPH) and California TB Controllers Association (CTCA) are also required.

AB 1667 impacted the following groups on 1/1/2015:

1. Persons employed by a K-12 school district, or employed under contract, in a certificated or classified position (California Education Code, Section 49406)
2. Persons employed, or employed under contract, by a private or parochial elementary or secondary school, or any nursery school (California Health and Safety Code, Sections 121525 and 121555).
3. Persons providing for the transportation of pupils under authorized contract in public, charter, private or parochial elementary or secondary schools (California Education Code, Section 49406 and California Health and Safety Code, Section 121525).
4. Persons volunteering with frequent or prolonged contact with pupils (California Education Code, Section 49406 and California Health and Safety Code, Section 121545).

SB 792 impacted the following group on 9/1/2016:

Persons employed as a teacher in a child care center (California Health and Safety Code Section 1597.055).

SB 1038 impacts the following group on 1/1/2017:

Persons employed by a community college district in an academic or classified position (California Education Code, Section 87408.6).

Testing for latent TB infection (LTBI)

Because an interferon gamma release assay (IGRA) blood test has increased specificity for TB infection in persons vaccinated with BCG, IGRA is preferred over the tuberculin skin test (TST) in these persons. Most persons born outside the United States have been vaccinated with BCG.

Repeat risk assessment and testing

If there is a documented history of positive TB test or TB disease, then a symptom review and chest x-ray should be performed at initial hire. Once a person has a documented positive test for TB infection that has been followed by a chest x-ray (CXR) that was determined to be free of infectious TB, the TB risk assessment (and repeat x-rays) is no longer required.

Repeat risk assessments should occur every four years (unless otherwise required) to identify any additional risk factors, and TB testing based on the results of the TB risk assessment. Re-testing should only be done in persons who previously tested negative, and have new risk factors since the last assessment.

Previous or inactive tuberculosis

Persons with a previous chest radiograph showing findings consistent with previous or inactive TB should be tested for LTBI. In addition to LTBI testing, evaluate for active TB disease.

Negative test for LTBI does not rule out TB disease

It is important to remember that a negative TST or IGRA result does not rule out active TB disease. In fact, a negative TST or IGRA in a person with active TB can be a sign of extensive disease and poor outcome.

Symptoms of TB should trigger evaluation for active TB disease

Persons with any of the following symptoms that are otherwise unexplained should be medically evaluated: cough for more than 2-3 weeks, fevers, night sweats, weight loss, hemoptysis.

TB infection treatment is recommended

Shorter regimens for treating LTBI have been shown to be as effective as 9 months of isoniazid, and are more likely to be completed. Shorter regimens are preferred in most situations. Drug-drug interactions and contact to drug resistant TB are frequent reasons these regimens cannot be used.

Please consult with your local public health department on any other recommendations and mandates that should also be considered.



Certificate of Completion Tuberculosis Risk Assessment and/or Examination

To satisfy **job-related requirements** in the California Education Code, Sections 49406 and 87408.6 and the California Health and Safety Code, Sections 1597.055, 121525, 121545 and 121555.

First and Last Name of the person assessed and/or examined:

Date of assessment and/or examination: _____mo./_____day/_____yr.

Date of Birth: _____mo./_____day/_____yr.

The above named patient has submitted to a tuberculosis risk assessment. The patient does not have risk factors, or if tuberculosis risk factors were identified, the patient has been examined and determined to be free of infectious tuberculosis.

X _____

Signature of Health Care Provider completing the risk assessment and/or examination

Please print, place label or stamp with Health Care Provider Name and Address (include Number, Street, City, State, and Zip Code):

Telephone and FAX:

Multiple Subject Application Checklist

Use this form as a checklist to assist you in preparing to apply to the program. Once you have items 1-10 checked off, submit your application packet, along with this checklist, to the Center for Advising and Student Services in the Kremen School, ED100.

Forms

- 1. MS Credential Program Application
Complete the following sections on the program application:
 - Student Information
 - Program Information
- 2. Signed Admission Interview *with Typed Responses*
- 3. Advising
Select and sign the appropriate Advising Form for your program.
- 4. Subject Matter Proficiency/CSET (*Met in one of the following ways*)
 - ✓ Provide a copy of all three (3) Multiple Subject CSET subtests passing scores.
 - ✓ Verify completion of an approved subject matter preparation program.
- 5. Medical Clearance
A current, signed and completed, TB Risk Assessment form. (*see admission requirements*)

Letters

- 6. Two Letters of Recommendation

Verifications

- 7. Apply to Cal State Apply (see admission requirements for exceptions)
If required, apply at <https://www2.calstate.edu/apply>
- 8. Basic Skills
Provide a copy from the list of options.
- 9. Certificate of Clearance
Provide a copy of your Certificate of Clearance.
- 10. Pre-Program Field Experience
Passed EHD 50 (or equivalent course) or Field Placement Waiver Form.

Pre-Admission Disclosure: Admission into programs leading to licensure and credentialing does not guarantee that students will obtain a license or credential. Licensure and credentialing requirements are set by agencies that are not controlled by or affiliated with the CSU and requirements can change at any time. For example, licensure or credentialing requirements can include evidence of the right to work in the United States (e.g., social security number or tax payer identification number) or successfully passing a criminal background check. Students are responsible for determining whether they can meet licensure or credentialing requirements. The CSU will not refund tuition, fees, or any associated costs, to students who determine subsequent to admission that they cannot meet licensure or credentialing requirements. Information concerning licensure and credentialing requirements are available from Sherri Nakashima, sherrin@csufresno.edu, 559.278.0300.