



TEACHER EDUCATION PROGRAM CERTIFICATION FORM NEW or RENEWAL

- **Certification is for a period of:** one year from date of certification and includes MIA membership.
- **All fields are required to be filled in.** If a field does not apply to you, type in **N/A**.
- **Application is considered complete:** when all requested information, supporting documents and payment has been received.
- **Certificate is shipped:** when application has been declared complete.

Application Must Be Typed or Clearly Printed in English.

SECTION 1 – TEACHER EDUCATION PROGRAM CONTACT INFORMATION			
Today's Date	* Items that will appear on MIA website.		
Legal Name of Organization			
* Name of Training Program (Type name exactly as it should appear on Certificate)			
* Program Address		* City	
* State/Province		* Zip code	* Country
* Name of Owner/Director		* Program Phone Number	* Program Website (Website must be translated in English)
* Program Facebook Page		* Program Email Address	
Date Program Established	If this application is for SATELLITE SITE, what is the Name of Main Site?		

SECTION 2 – COURSE LEVEL INFORMATION			
COURSE LEVEL(S) SEEKING INITIAL MIA CERTIFICATION	PROGRAM DIRECTOR OR LEVEL COORDINATOR	COURSE LEVEL(S) SEEKING RENEWAL MIA CERTIFICATION	
<input type="checkbox"/> New — Infant & Toddler (Birth to 18 Months)		<input type="checkbox"/> Renewal — Infant & Toddler (Birth to 18 Months) Membership # _____	
<input type="checkbox"/> New — Early Childhood (3 to 6 Years)		<input type="checkbox"/> Renewal — Early Childhood (3 to 6 Years) Membership # _____	
Are your Course Levels MACTE Accredited?			
Complete ALL that apply.			
	YES	NO, but we are in process	NO
Infant & Toddler (Birth to 18 Months)	Issue Date _____ End Date _____	We applied on: _____ (date)	_____
Early Childhood (3 to 6 Years)	Issue Date _____ End Date _____	We applied on: _____ (date)	_____

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SECTION 3 – ATTACHMENTS REQUIRED FOR EACH COURSE LEVEL

Choose **INITIAL OR RENEWAL**

INITIAL CERTIFICATION OF COURSE LEVEL (B-18 mo., 3-6 yr., 6-9 yr., 9-12 yr.)

CHECK LIST

- Schedule of Trainings (MACTE version accepted)
- Practicum Site List
- Faculty Summary Form (MACTE version accepted)
- Copies of all Bachelor Degrees and Montessori Certificates for **in Program Director, Level Coordinators, or any Course Instructors/Field**

Supervisor.

- One-page** description of how your Course Level meets following principles:
 1. Meet the needs of the Adult Learner (evaluate the Adult Learner, connect Adult Learner with practicum sites, future employment, etc.)
 2. Meets program capacity (size of building, number of classrooms, ratio of Course Instructor to Adult Learners, supply of materials & technology, etc.)
 3. Meets financial responsibilities (income and expenses, etc.)

Resource material can be found in *MIA Certification Standards & Procedures* (available upon request info@mia-world.org) and *MACTE Guide to Accreditation* (available in Document Library on website www.macte.org)

RENEWAL CERTIFICATION OF COURSE LEVEL (B-18 mo., 3-6 yr., 6-9 yr., 9-12 yr.)

- There have been changes** in Program Director, Level Coordinators, or any Course Instructors/Field Supervisor.

ATTACHMENTS CHECK LIST

- Faculty Summary Form (MACTE version accepted)
- Copies of all Bachelor Degrees and Montessori Certificates for **new** Program Director, Level Coordinators, or any Course Instructors/Field Supervisor. **(Required)**
- Practicum Site List
- Schedule of Trainings (MACTE version accepted)

- No changes** in Director or any Course Instructors or Field Supervisors.

ATTACHMENTS CHECK LIST

- Practicum Site List
- Schedule of Trainings (MACTE version accepted)

SECTION 4 – DIRECTOR'S AFFIRMATION

"I affirm that:

- All statements and information provided herein are true and accurate.
- I understand that a MIA representative may periodically visit this Teacher Education Program for the purpose of verification, in accordance with MIA guidelines."
- If I have supplied misspelled or inaccurate information on this application, it could cause the application to be deferred or cause information to be displayed incorrectly on the certificate and on the MIA website, due to no fault of MIA or its representatives.

Director's Name (Print)

Director's Signature

Date _____

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SECTION 5 – PAYMENT INFORMATION

Certificates will not be issued until payment is received.

Payable in U.S. dollars and drawn on a U.S. bank only. Payment arrangement must be specified on application.

Use this information to help you complete the calculation section below.

INITIAL COURSE LEVEL APPLICATION \$1000/ 1st year (1 training level)

Each Additional Training Level - \$500

Example: Birth-3 and 3-6 Training levels = \$1500

RENEWAL COURSE LEVEL APPLICATION \$200/ 1 year (1 training level)

Each Additional Renewed Training Level - \$100

Example: Birth-3 and 3-6 Renewed Training Levels = \$300

3 YEAR RENEWAL COURSE LEVEL APPLICATION \$600/ 3 years (1 training level)

Each Additional Renewed Training Level – \$300 (\$100 X 3)

Example: 3-year Renewal for Birth-3 and 3-6 Renewed Training Levels – \$900 (\$600+\$300=\$900)

Calculate your payment below.

<input type="checkbox"/>	INITIAL COURSE LEVEL APPLICATION	1st year (1 course level)	\$1000.00
	ADD for each additional course level	\$500.00 x _____ (total additional course levels) =	\$ _____
	INITIAL COURSE LEVEL APPLICATION TOTAL DUE		
	<i>Enter this amount in the Amount Payable under Payment Method below</i>		\$ _____
<input type="checkbox"/>	RENEWAL COURSE LEVEL APPLICATION	1 year (1 course level)	\$ 200.00
	ADD for each additional renewal course level	\$100.00 x _____ (total additional course levels) =	\$ _____
	RENEWAL COURSE LEVEL APPLICATION TOTAL DUE		
	<i>Enter this amount in the Amount Payable under Payment Method below</i>		\$ _____
<input type="checkbox"/>	3 YEAR RENEWAL COURSE LEVEL APPLICATION	3 years (1 course level)	\$ 600.00
	ADD for each additional renewal course level	\$300.00 x _____ (total additional course levels) =	\$ _____
	RENEWAL COURSE LEVEL APPLICATION TOTAL DUE		
	<i>Enter this amount in the Amount Payable under Payment Method below</i>		\$ _____

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SECTION 6 – PAYMENT METHOD

*Certificates will not be issued until payment is received.
 Payable in U.S. dollars and drawn on a U.S. bank only. Payment arrangement must be specified on application.*

Calculate your total Amount Payable and choose a Payment Method.

Total Amount Payable \$
GRAND TOTAL

Check one:

Individual Teacher Education Program payment

Person making payment _____

Check # _____ Money Order

PayPal Credit Card

If other form of payment is needed CONTACT MIA National Office admin@mia-world.org

Name on Credit Card	Credit Card Number	Exp.	CSC
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By providing your credit card information, you are authorizing MIA to charge your account the amount indicated above.

Teacher Education Program has included a Summary Cover Page.

SECTION 7 – PROGRAM DIRECTOR’S CONTACT INFORMATION AND PROGRAM SHIPPING ADDRESS
This information will NOT appear on the MIA website but may be used by MIA for contact purposes.

Program Director’s Name		
Program Director’s Email Address (if different from TEP email address)	Director’s Business Phone No.	Director’s Cell Phone No.
Shipping Address of TEP (If different from above)	City	
State/Province	Zip code	Country

SEND OR EMAIL APPLICATION TO:	
<p>QUICKEST METHOD:</p> <p>Scan and Email Application to: CertificationReview@mia-world.org</p>	<p>MAILING ADDRESS:</p> <p>Montessori Institute of America 6107 SW Murray Blvd. #306 Beaverton, OR 97008</p>

FOR OFFICE USE ONLY-DO NOT WRITE BELOW THIS LINE			
Date Received		Pmt. Received.	
Approved Date		Approved By:	