

Teacher Academy of Maryland (TAM) Program Completion Verification Form

Student Information:

Last Name		First	Da	te of Birth <u>//</u>
Street Address			City	
State	Zip Code_		Phone	
High School			School System	۱
TAM Program of	Study			Course Final Grade

11101 Hogium of Study	Course I mai Orade
Human Growth & Development through Adolescence	
Teaching as a Profession	
Foundations of Curriculum & Instruction	
The Education Academy Internship	

Program of Study Grade Point Average (GPA):	
Program of Study Completion Date:	

Verification of TAM Program Completion

We, the undersigned, hereby verify that the student named above has successfully completed the Teacher Academy of Maryland Program of Study in accordance with the expectations of Salisbury University as stipulated in the **TAM** Memorandum of Understanding. As such, the above student has maintained a cumulative GPA of at least 3.0 in this program of study with no grade of less than 2.0 in any TAM course.

Authorized Administra		Date		
Principal		 	Date	
SU Use Only: Student ID:	Major:	 	Dept. Chair/Assoc. Dean Signature	Date
Credit to Award:		gistrar Staff Sig	nature Date	

Please forward completed form to: Salisbury University Seidel School Dean's Office 1101 Camden Ave. Salisbury, MD 21801 Phone: 410-543-6335