

# Application for Admission to the K – 12 Library Media Endorsement Program and / or Library Media Minor

**Please submit completed application to:**

Anne Kish, M.L.I.S.  
The University of Montana Western  
710 South Atlantic  
Dillon, MT 59725

**Introduction:** This program is offered jointly by the University of Montana Missoula campus and the University of Montana Western campus. Some of the courses in this endorsement program are offered through UMM and some are offered through UMW. This application is used by both UMM and UMW to determine eligibility for admission to the joint Library Media Endorsement Program and to each institution. Applicants select either UMM or UMW as their “home” institution by requesting an undergraduate degree admission status there. Students who wish to apply to a master’s degree program or for graduate credit non-degree status should use this form and the UM Missoula Graduate School application form. The endorsement will be recorded and any financial aid will be administered by the home institution. After gaining admission to the program using this application form, students enroll for all coursework at their home institution, whether UMM or UMW.

## **Contact for more information:**

Tava Smathers, University of Montana Missoula - Director of K-12 Teacher Librarian Program / Instructor  
970-708-3900 (mobile)  
[tava.smathers@umontana.edu](mailto:tava.smathers@umontana.edu)

Anne Kish, University of Montana Western - Library Interim Director /and Instructor  
406-683-7494  
[a\\_kish@umwestern.edu](mailto:a_kish@umwestern.edu)

**Home Institution and Admission Status Options:** Part III of the application directs applicants to select a Home Institution and to select an admission status. To help applicants choose the correct status, each type of status is described:

**Continuing student** – This status describes a student who is already enrolled as a student at either UM Missoula or UM Western.

**Transfer, no bachelor's degree earned** – This status describes an undergraduate student who is working on the first bachelor's degree and who is enrolled at an institution other than UM Missoula or UM Western. The Home Institution requires official transcripts from all colleges / universities previously attended.

**Post-baccalaureate, transfer, first bachelor's degree earned --** This status describes a student who has completed a first bachelor's degree at an institution other than UM Missoula or UM Western. The Home Institution requires official transcripts from all colleges / universities previously attended. Library Media coursework will be completed for undergraduate credit.

**Post-baccalaureate, first bachelor's degree earned --** This status describes a student who has completed a bachelor's degree from UM Missoula or UM Western. Library Media coursework will be completed for undergraduate credit.

**Graduate degree (UM Missoula only)** Graduate degree status is used by students who are enrolled in or seeking admission to a graduate degree program (i.e., master's, doctorate). Additional application materials are required for those applying to the graduate degree program. Please contact UM Missoula for additional information.

**Graduate nondegree (UM Missoula only)** Graduate nondegree status allows students who have earned a bachelor's degree but who are considering a graduate degree program or need graduate credit for their district salary matrix to pursue studies for personal or professional growth, licensure, or endorsements. Library Media coursework will be completed for graduate credit.

## PART I PERSONAL INFORMATION

U.S. Social Security Number: _____		Date of Birth (mo/day/year) _____	
Last Name or Family/Surname _____		First Name _____	Middle Name _____
Previous Names, if any: _____			
Current Mailing Address No. & Street _____		City _____	State/ Country _____ Zip / Postal Code _____
Permanent Address Number/Street _____		City _____	State/ Country _____ Zip / Postal Code _____
		Area Code / Phone No. _____	
		Area Code / Phone No. _____	
Country of Citizenship _____	Place of Birth (City, State/Country) _____	E-Mail Address _____	

## PART II ENTRY SEMESTER

Term & Year Expected to Enter: _____	_____ Fall 201 _____	_____ Spring 201 _____	_____ Summer 201 _____
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## PART III HOME INSTITUTION

Indicate your request for Home Institution and related admission statuses (see Introduction):

The University of Montana Missoula is Home Institution for purposes of the Library Media Program and financial aid. Admission status requested at UM Missoula is:

\_\_\_ Continuing student  
\_\_\_ Transfer, no bachelor's degree earned  
\_\_\_ Post-baccalaureate, transfer, first bachelor's degree earned  
\_\_\_ Post-baccalaureate, first bachelor's degree earned  
\_\_\_ Graduate degree (separate application required, contact Kristi Murphy)  
\_\_\_ Graduate nondegree (separate application required, contact Kristi Murphy)

The University of Montana Western is home institution for purposes of the Library Media Program and financial aid. Admission status requested at UM Western is:

\_\_\_ Continuing student  
\_\_\_ Transfer, no bachelor's degree earned  
\_\_\_ Post-baccalaureate, first bachelor's degree earned

## PART IV ACADEMIC HISTORY

HAVE YOU PREVIOUSLY ATTENDED UM MISSOULA? \_\_\_YES \_\_\_NO (If YES, it is very important that you list your attendance dates)

here▶

HAVE YOU PREVIOUSLY ATTENDED UM WESTERN? \_\_\_YES \_\_\_NO (If YES, it is very important that you list your attendance dates)

here▶

List in chronological order all colleges, universities and other institutions of higher education that you have attended or are attending

College or University	City/State	Dates Attended From - To (mo/yr)	Degree, Major AND Date Received or Expected	Grade Point Average

## PART V VOLUNTARY INFORMATION

The following information is requested solely for the purpose of determining compliance with Federal Civil Rights Laws. Your response will not affect consideration of your application. By providing this information, you will assist us in assuring that this program is administered in a non-discriminatory manner.

Gender: Male \_\_\_ Female \_\_\_

Ethnic Information: African American \_\_\_ American Indian/Alaskan Native \_\_\_ Asian/Pacific Islander \_\_\_  
Caucasian/White \_\_\_ Hispanic \_\_\_ Other \_\_\_

The following information may be used for planning purposes.

How did you first learn about The University of Montana? \_\_\_\_\_

What factor(s) most influenced your decision to apply? \_\_\_\_\_

## PART VI MONTANA UNIVERSITY SYSTEM SAFETY/SECURITY

Have you ever been subject to discipline, suspension or probation at any institution of post-secondary education for reasons not related to academic performance? Yes \_\_\_ No \_\_\_ If yes, at what institution?

Have you ever been convicted of a criminal offense involving physical injury to persons or property or otherwise institutionalized for conduct causing physical injury to persons or property? Yes \_\_\_ No \_\_\_

# PART VII RESIDENCY FOR FEE PURPOSES

Were you in the armed services of the United States? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, dates and locale of active duty:

Of what state are you a resident?

If you are not a U.S. citizen, are you a "Lawful Permanent Resident" of the U.S.? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please provide a photocopy of your Alien Registration Receipt Card or "Green Card."

If no, please be sure to fill out PART VIII INTERNATIONAL STUDENT INFORMATION.

If you claim Montana residency for fee purposes, complete the appropriate column below:

If your parents claim you as a federal tax exemption, answer the following:

Who claims you as a federal tax exemption?

Name \_\_\_\_\_

Relationship \_\_\_\_\_

Beginning date of Montana residency \_\_\_\_\_

Date of extended absences from Montana \_\_\_\_\_ to \_\_\_\_\_

Last three years Montana income taxes have been filed \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
\_\_\_\_\_ as a part-year resident \_\_\_\_\_ as a full-year resident

Date of Montana voter registration \_\_\_\_\_

Date of Montana driver's license \_\_\_\_\_

Date of Montana vehicle registration \_\_\_\_\_

What is their employment status (full-time, part-time, retired)? \_\_\_\_\_

Employer: \_\_\_\_\_

Date of Employment \_\_\_\_\_

If your parents do not claim you as a federal tax exemption, answer the following:

Beginning date of Montana residency \_\_\_\_\_

Date of extended absences from Montana \_\_\_\_\_ to \_\_\_\_\_

Last three years Montana income taxes have been filed \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
\_\_\_\_\_ as a part-year resident \_\_\_\_\_ as a full-year resident

Date of Montana voter registration \_\_\_\_\_

Date of Montana driver's license \_\_\_\_\_

Date of Montana vehicle registration \_\_\_\_\_

Employment status (full-time, part-time, retired) \_\_\_\_\_

Employer: \_\_\_\_\_

Date of Employment \_\_\_\_\_

Spouse's employment status (full-time, part-time, retired) \_\_\_\_\_

Employer: \_\_\_\_\_

Date of Employment \_\_\_\_\_

Dates of military service \_\_\_\_\_ to \_\_\_\_\_

City & state from which you entered the service \_\_\_\_\_

## PART VIII INTERNATIONAL STUDENT INFORMATION

Name and relationship of each dependent coming to the United States with you:

Spouse's name, complete mailing address and phone number:

If you are now in the United States, indicate non-immigrant visa type and expiration date:

### Language Preparation

Which evidence of English proficiency do you wish to present? \_\_\_\_\_

What language is spoken in your home? \_\_\_\_\_

How many years of formal instruction in English have you completed? \_\_\_\_\_

At what educational level was that instruction? \_\_\_\_\_

### Financial Information

Funds available from savings \$ \_\_\_\_\_

Committed by family or friends \$ \_\_\_\_\_

Committed by your government \$ \_\_\_\_\_

Other funding resources (please designate)

## PART IX APPLICATION FEE

Students who are applying to an undergraduate status and who have never before enrolled in an undergraduate status at a unit of the University of Montana (UM Missoula, UM Western, Montana Tech or Helena COT) must submit a \$30 application fee along with this form. Checks or money orders should be written to the home institution.

# PART X LME PROGRAM INFORMATION

Name: \_\_\_\_\_  
(Last) (First) (Middle)

If certified to teach, check: Elementary \_\_\_\_\_ Secondary \_\_\_\_\_

Applying for: \_\_\_\_\_K-12 library media \_\_\_\_\_Non-teaching library media \_\_\_\_\_Master's program

If you have a teaching certificate, what is the field? \_\_\_\_\_Level? \_\_\_\_\_

Have you been fully admitted to the Teacher Education Program: \_\_\_\_\_Yes \_\_\_\_\_No

\_\_\_\_\_Elementary Education \_\_\_\_\_Secondary Education \_\_\_\_\_  
Major Minor

If undergraduate, name and date of degree to be earned: \_\_\_\_\_

If neither of the above applies, are you working towards a non-teaching minor? \_\_\_\_\_

Cumulative GPA \_\_\_\_\_(2.75 GPA is required for Full Admission.)

Job experience (list most recent position first):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*FOR OFFICE USE ONLY*  
\_\_\_\_ Full Admission  
\_\_\_\_ Provisional Admission  
\_\_\_\_ Other \_\_\_\_\_  
Signed \_\_\_\_\_  
Date \_\_\_\_\_

Activities, hobbies, and interests:

\_\_\_\_\_  
\_\_\_\_\_

Technology skills:

\_\_\_\_\_  
\_\_\_\_\_

What contacts with children and young adults have you had?

\_\_\_\_\_  
\_\_\_\_\_

## PART XI NOTICE CONCERNING BACKGROUND CHECK

If you are (1) applying for initial Montana educator licensure, (2) seeking emergency authorization of employment, or (3) seeking to reinstate a lapsed, revoked or suspended educator license, Montana Board of Education policy requires you to provide information and material to obtain a fingerprint-based national criminal history background check (a "background check"). ARM 10-57-201A (3). The State Superintendent of Public Instruction may not issue a license until the background check has been completed and the results of the background check have been delivered to and reviewed by the Office of Public Instruction.

Please provide your initials to confirm that you have read and understand the above Notice Concerning Background Check: \_\_\_\_\_

## PART XII RELEASE AND SIGNATURE

As part of my participation in the Library Media Endorsement program, I authorize The UM-Missoula and The UM-Western to make and exchange copies of my original application materials, immunization records and official transcripts. Additionally, I certify that the information in this application is true and complete to the best of my knowledge and I understand that inaccurate information may affect my admission, enrollment, and/or financial aid status

Applicant's signature

\_\_\_\_\_

PLEASE ENCLOSE THIS APPLICATION ALONG WITH OTHER REQUESTED MATERIALS AND MAIL TO ANNE KISH, INTERIM DIRECTOR, LUCY CARSON LIBRARY, UM WESTERN, 710 SOUTH ATLANTIC, DILLON, MT 59725