CALIFORNIA STATE UNIVERSITY, SACRAMENTO
College of Education, Teacher Preparation and Credentials
6000 J Street, Sacramento, CA 95819-6079
(916) 278-6403

SMCV

SUBJECT MATTER COMPETENCE VERIFICATION

Use this form if you have completed/are completing a single subject Subject Matter Program (SMP) at Sacramento State or use this form for SMP equivalency verification if you completed an approved subject matter program at another California college/university. This form requires a signature from a Commission on Teacher Credentialing (CTC) approved advisor at Sacramento State. Submit this form completed and signed with your Program Application.

	xxx / xx /
Last Name **First** **MI**	**Social Security #** *(last 4 digits only)*
Subject Matter Area *(teaching area)*	**Program Advisor**

A. Applicant has completed a Sacramento State Subject Matter Program or equivalent.

_____ _____
Signature of Program Advisor *Date*

B. Applicants who are still completing a Sacramento State approved subject matter program or equivalent: This certifies that the above named applicant will be eligible to begin the program in the _____ semester. When the program begins, the applicant will have three (3) or fewer semester units to complete or only one of the following exams to pass: ☐ Spanish G-Exam - OR - ☐ Traditional Grammar Exam

Listed below are the "in-progress" course(s) and/or the one (1) remaining requirement for completion of the Sac State SMP.

In Progress	To Take	To Take When	Course Number and Title	Units	Comments
☐					
☐					
☐					
☐					
☐					

_____ _____
Signature of Program Advisor *Date*

C. Applicants who are completing requirements in Section B above: *"I understand that I must complete all the above requirements (course[s] or exam) before I can begin my Phase III student teaching assignment. If any changes are made to the above requirements, I understand that I must submit a revised SMCV form to the Teacher Preparation Office indicating the change(s) and including the signature of my program advisor."*

_____ _____
Signature of Applicant *Date*

Please retain a copy of this form so you will know which requirements need to be satisfied.

Applicants for the following subject areas only:

D. Department Interview: This certifies that the above-named applicant ☐ has or ☐ will have interviewed with the following department (please check):

☐ art ☐ foreign languages ☐ home economics ☐ music ☐ physical education

_____ _____
Signature of Program Advisor *Date*

EXEMPTIONS

E. Applicants completing a subject matter program at another California institution must submit verification of your completed subject matter program on the letterhead stationary of your school. Check with your college's Credential Office for the approved evaluator.

(Rev:8/2010)