Amberton University
School Counseling (252)
TExES-252 Examination Approval Request Form

The information requested below is required by individuals eligible to register for the TExES-252 School Counseling Examination. Registration approval will only be provided to students who satisfy the requirements of Amberton University. See testing requirements noted in the School Counseling Handbook. Prior to completing the TExES-252 Examination, the following courses must be completed: CSL6745, CSL6779 and CSL6833.

Students will be notified by email that approval to register for the TExES-252 examination has been granted by the University. Confirmation of a successful registration will be emailed (email address provided in the S.B.E.C. Educator Profile) to individuals by the Pearson Testing Service.

KEEP A COPY OF THIS FORM TO REFERENCE WHEN YOU REGISTER.

Please complete the form below by **printing** the information requested.

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1. Name_____
   First Middle Last
2. Address_____ _____ SS#_____

   City_____ State_____ Zip_____
3. Phone: Home_____ Work_____
4. Date of Birth ____/____/_____ Personal Email Address _____
   (Do not use Amberton University Email Address)
5. Session of First Enrollment (circle): Summer, Fall, Winter, Spring Year: _____
6. Route to Certification: University Post Baccalaureate Program with Preparation (33)
7. Anticipated Session/Year M.A. degree in School Counseling to be awarded: _____/____
8. Anticipated TExES Test Date for School Counselor (252): _____
9. Texas Education Agency (T.E.A.) approved Teaching Experience Summary (if applicable):

School District	Years of Service
_____	_____
_____	_____
_____	_____
Total Years	_____

I authorize Amberton University to use the above information in providing authorization for me to register for the TExES-252 examination. I further understand that it is my obligation to verify the accuracy of the information provided at the S.B.E.C. website (https://tea.texas.gov/texas-educators/certification/educator-certification-online-system) with the common information requested during the registration process at http://www.tx.nesinc.com/Home.aspx

Signature_____ Date_____