

## MCDHH Test of English Proficiency (TEP) Checklist

O Interpreter Registry Information Form **AND** Application for MICS Written Test of English Proficiency (TEP)

Get both forms notarized. You must sign the forms in the presence of a Notary Public.

O Cashier's check or money order for \$50 (\$40 testing fee + \$10 application fee). *If you are an out-of-state resident, you will need to pay the \$35 out-of-state fee*). Online payments can be made at: https://magic.collectorsolutions.com/magic-ui/ payments/mo-elem-secondary-education/201901

Make the check payable to MCDHH/BCI fund.

O College transcripts (*Unofficial copies are acceptable*)

TEP requires 30 college credit hours

Performance requires 60 college credit hours

If you are already MICS certified, you don't need to send transcripts

O Mail the following to MCDHH: 1) notarized forms, 2) this checklist, 3) transcripts, and 4) cashier's check/money order or confirmation receipt of online payment.

Missouri Commission for the Deaf and Hard of Hearing 3216 Emerald Lane, Suite B Jefferson City, MO 65109

## Once we receive your paperwork and fees:

- o We will send you an email offering times/dates that the test will be offered.
- You respond via email, selecting a time/date
- We send a second email: confirming your appointment, suggesting material for you to study and providing additional instructions for the test.

Note: Your test will not be scheduled until all paperwork and fees have been received



## MICS TEP APPLICATION

(Test of English Proficiency)

Missouri Commission for the Deaf and Hard of Hearing 3216 Emerald Lane, Suite B · Jefferson City, MO 65109 (573) 526-5205

**Instructions:** Return the completed and notarized form along with the testing fee of \$40.00 (plus the \$10.00 application fee and \$35.00 out-of-state process fee (if applicable) to MCDHH. Fee payment must be in the form of a cashier's check or money order made payable to "MCDHH/BCI Fund" or a receipt for online payment from

https://magic.collectorsolutions.com/magic-ui/payments/mo-elem-secondary-education/201901. NO PERSONAL CHECKS

WILL BE ACCEPTED.							
APPLICANT INFORMATION:							
Previous							
Name:		Name <u>(s):</u>					
		Date of					
SNN:		Birth:					
Phone: ( )		Alt. Phone: _(	)				
Current address:		Eı	mail:				
Street Address							
	City, State, Zip Code						
QUALIFYING QUESTIONS:							
200.050)	ed 'yes', you are exemp		nal requirements (5 CSR 100-redit hours. (Unofficial transcripts				
Have you taken the TEP  No Yes	previously?  Date:	Locat	ion:				
I, the above named applicant, being first duly sown upon my oath, state as follows: I have personally completed the foregoing application truthfully and without omission.							
	ly divulge confidential informa		s thereto are true to the best of my knowledge ation process, including content, topic,				
I will comply with state laws, rul any false statement or material	_	The state of the s	eters and I will make this affidavit knowingly, and section 575.050 RSMo.				
MUST BE SIGNED IN PRESENCE OF NOTARY	APPLICANT SIGNATURE		DATE				
Notary Public	STATE		COUNTY (or City of St. Louis				
Embossed Seal or Stam	p	SUBSCRIBED AND SWORN BEFORE ME, THIS					
		DAY 0	DF 20				
	NOTARY PUBLIC SIG		My Commission Expires				
	NOTABY BUBLIC MAI	ME (Typed or Printed)					
	NOTART PUBLIC NAI	vie (Typeu of Pfffileu)					