

**The University of Tennessee at Martin
District Intent to Hire
Job-Embedded Occupational Practitioner License**

The top two sections of this form must be completed in full by the employing system.

Name of teacher candidate: _____ Date: _____

SSN: XXX-XX-_____ Date of Birth: _____

Email address: _____

Endorsement title/code*: _____ (code _____)

School Assigned to: _____

Grade Level and Subject Assigned to Teach: _____

Name of Assigned Mentor: _____ Mentor's License #: _____

Intent to Hire on Job-Embedded Occupational Practitioner License

After determining that the following candidate meets employment qualifications, including a criminal background check that is acceptable for hiring purposes, _____

School System intends to hire this candidate on the Practitioner license,
effective (date)_____.

Signature of school system's licensure contact: _____

Licensure contact (print): _____

Email: _____ Phone: _____

*** UTM will admit the candidate under this designated endorsement code above.**

This signed form is to be returned to Becky Wilson (rwilso34@utm.edu or fax 731-881-7984) at The University of Tennessee at Martin.

It is solely the responsibility of the teacher candidate to remain on track in order to continue in the program. If the candidate fails to meet the continuation requirements, he/she will not be allowed to continue in UT Martin's job-embedded occupational licensure program.