

**ADVISING PLAN FOR**

<b>REQUIREMENTS TO COMPLETE</b>	<b>WHAT DATE TO DO THIS</b>
<b>MTTC PRE TEST (Formerly Basic Skills)</b>	
<b>APPLY TO TEACHER ED PROGRAM</b>	
<b>APPLY FOR STUDENT TEACHING</b>	
<b>FINGERPRINTING</b>	
<b>MTTC SUBJECT AREA TESTS</b>	
<b>CPR/FIRST AID CERTIFICATION DATE</b>	