## Intermediate Standing Application

rections: Student must complete entire form and provide requested evid	uence. Submit to advisor for signature.		Advi √
Name			
Date			
Campus Address			
Telephone			
Email			
Advisor			
<i>Concentration you are declaring:</i>			
Is your Overall GPA 2.5 or higher? • Must provide My Westfield Degree Evaluation	My Overall GPA is:		
I have taken MOVP 100 Science of PA and Health.	My Grade was:		
I have taken MOVP 112 Musculoskeletal Structure/ Function.	My Grade was:		
I have included a writing sample from Comp I or II • Sample must have a grade of B- or better.	Yes No		
I have included a copy of my initial advisement form	Yes No		
I have included a copy of my current First/Aid and CPR card	Yes No Expiration D	ate:	
I have included 2 Faculty Evaluations using Appendix X form.	List faculty name:		
	List faculty name:		
I have included copies of my 12 PDPs	Total # of PDPs:		
Academic (list and point value)	Name of PDP	Points	
	1.		
	2.		
	3.		
• Professional (list and point value)	Name of PDP	Points	
	1.		
	2.		
	3.		
• Clinical (list and point value)	Name of PDP	Points	
	1.		
	2.		
	3.		
Social Justice and Inclusion (list and point value)	Name of PDP	Points	
	1.		
	2.		
	3.		
PE Concentration ONLY – I have taken or signed up	Yes, I have taken both. Passed: Yes	No	
for the Communication and Literacy MTEL and have	OR	110	
provided verification.	I have signed up. Test Date:		
	Student Signature:		1
Advisor has reviewed and signed?	Stationt Signature.		
Advisor has reviewed and signed?	A device a Cience trans		╂──
	Advisor Signature:		