

Licensure Information Form

This form is required for Mississippi State University to provide recommendation for licensure using the Mississippi Department of Education online ELMS system.

Please submit a completed copy of this form to the OCFBI office by mail, fax, email, or in person to the following:

NOTE: If you choose to email, do NOT include your SSN on this form. Please call the office to give instead.

Office of Clinical/Field-Based Instruction and Licensure
Attn: Laura Kate Tribble, Licensure Specialist
Box 9710
Mississippi State, MS 39762

ltribble@colled.msstate.edu
Phone: (662) 325-2206
Fax: (662) 325-0615
Allen Hall 318 – Mailstop 9710

First Name & MI:

Last Name:

Social Security
Number: *

Net ID:

Date of Birth:

Date of
Graduation:

Email:

Phone
Number:

Primary Content/
Licensure Area:

SSN is required for adding recommendations using the MDE online ELMS system. If you do not provide this data we will be unable to complete your licensure request. **For your safety, do NOT email your SSN.*

MSU Campus:

☐ Starkville

☐ Meridian

Other Endorsements or Concentration Areas:

(please check any that apply)

☐ AEST

☐ Agriculture

☐ Art

☐ Biology

☐ Business Education

☐ Chemistry

☐ Child Development

☐ Computer Apps

☐ Driver's Education

☐ English

☐ French

☐ Gen. Science

☐ Health Ed

☐ Other _____

☐ Math

☐ Music – Instrumental

☐ Music – Vocal

☐ Nursery - Grade 1

☐ Physical Ed

☐ Physics

☐ Reading

☐ Social Studies

☐ Spanish

☐ SPED Emotionally Disturbed

☐ SPED Mild/Moderate

☐ SPED Severe/Profound

☐ TESOL

Degree Program:

☐ Bachelor

☐ Master

☐ Specialist

☐ Doctorate

☐ Non-Degree

(Endorsement only)

