



KNOX COMMUNITY COLLEGE

Bachelor of Education

Specializing in:- **Primary Education** **(Completion)**
 Secondary Education **(Completion)**

Knox Community College
Spalding, Clarendon
Jamaica, West Indies

BACHELOR OF EDUCATION

I DURATION: Two years (completion)

II PROGRAMME STRUCTURE: Classes are run over four (4) semesters:
Each course is approximately fifteen (15) weeks in duration.
Semester 1 begins in September: Monday – Friday 5 – 8 pm
Semester 2 begins in January: Monday – Friday 5 – 8 pm
Semester 3 is the Summer Semester. This semester begins in May.

May – June 5 – 8 pm and July and August 8 am – 5 pm
Monday – Friday.

(Some Saturdays and public holidays may apply throughout)

Current locations – Spalding Campus (Primary/Secondary)
Mandeville Campus (Primary Only)
May Pen Campus (Primary Only)

The degree is offered at two (2) levels, namely,
Primary and Secondary.

Primary/Secondary Diploma : Students will be expected to complete 60 credits, inclusive of Practicum, Action Research and Electives.

Primary/Secondary Certificate: Students will be expected to complete 75 credits inclusive of Practicum, Action Research and Electives.

III TUITION AND FEES

- **Tuition**

The proposed tuition for the 2006/7 academic year is \$4200 per credit.

The tuition and other fees are usually paid a week before the course begins. Students are asked to remember that no one in arrears will be allowed to sit the final examination at the end of a course.

Please use the Knox official bank voucher to make lodgments of all fees.

- **Knox Continuing Fees – Academic year 2006 - 2007**
Each semester includes a continuing fee of J\$10,000 and a computer/internet services fee of J\$4,000.
- **Graduation Fee**
A fee is required at the end of the programme to complete the degree conferral process.

Please note: Tuition fees are to be lodged to the Knox Community College account at National Commercial Bank
Please use **only** the official voucher.

FEES ARE SUBJECT TO CHANGE WITHOUT NOTICE.

IV QUALIFICATION FOR ENTRY

Students admitted to the B.Ed. programme must meet the following admissions requirement.

- **Completion Programme/(Primary & Secondary)**: applicants **must** possess either an earned teaching diploma or Certificate from a Teachers' College, or an equivalent Institution such as a University or other training institution such as NCTVET.

Students with Teachers' Diploma should have at least **75** transferable credits.

Students with Teachers' Certificate should have at least **60** transferable credits.

V APPLICATION PROCESS:

- Pay a non-refundable fee of J\$500
- Collect application form
- Submit official transcripts from all previously attended high school, colleges, or universities.
- Submit two letters of recommendation (one must be from your hiring Principal/Employer that attest to the ability of the applicant to complete a Baccalaureate programme.
- Submit completed application form to:
The Registry
Knox Community College

VI CONTACT

Knox Community College, P.O. Box 52, Spalding, Clarendon, Jamaica W.I.
Education Department
Tel # : 858 – 3002/987 – 8047/8049 ext 2184
E-Mail: gracebarnes1@yahoo.com
Fax: 964 – 0218 or 987 - 8048



KNOX COMMUNITY COLLEGE DEPARTMENT OF EDUCATION

INSTRUCTIONS

1. Complete application form. Please remember to sign it.
2. Attach payment receipt for application fee. No Cash.
3. If possible, attach copies of transcripts. Unofficial copies of transcripts will start your student file, but will NOT fully admit you to the program. Applications can be taken to the Registry on the Spalding Campus, or mailed directly to

The Registry
Knox Community College
Att: Education Department
P.O. Box 52
Spalding , Clarendon
Jamaica, West Indies

4. Attached are “Recommendation for Admission” forms. Two completed recommendation forms are required for admittance into the programme. These forms must be sent to:

The Registry
Knox Community College
Att: Education Department
P.O. Box 52, Spalding
Clarendon
Jamaica West Indies

5. For all admissions related questions and issues pertaining to the Education Programme, please contact:
Miss Grace Barnes (Programme Director)
Knox Community College
Att: Education Department
P.O. Box 52 Spalding, Clarendon
Jamaica W.I.
Tel#: 858 – 3002/987 – 8047 ext 2184
E-Mail at: gracebarnes1@yahoo.com

Please list all tertiary institutions attended and provide official transcripts from each.

| Complete Name of College/University | Country | Date Enrolled Month/Year | Date Completed Month/Year | Major | Award/Year | G.P.A. |
|-------------------------------------|---------|--------------------------|---------------------------|-------|------------|--------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

Citizenship

Jamaican

Non Jamaican

Specify _____

| Current Employment | | Date Employed | |
|--------------------|----------------|---------------|----|
| Position | School/Company | From | To |
| | | | |
| | | | |
| | | | |

(Please list current employment first)

Please note the following statements:

1. I declare that the above information to the best of my knowledge is complete and accurate. I have read, and understood the requirements, policies and procedures stated in the catalogue, and I agree to abide by all the rules and regulations governing the programme at Knox Community College.
2. I give Knox Community College permission to publish and use any photographs in which I appear that may be taken during class or other College activities.
3. I understand that all required official and final documents must be submitted within 30 days from the start of the Semester for which I am enrolling.

Applicant's Signature

Date



KNOX COMMUNITY COLLEGE

Education Department
P.O. Box 52
Spalding
Clarendon
Jamaica, West Indies

Principal/Employer: Recommendation for admission
to the Bachelor of Education Degree Programme

To the Applicant: This form should be completed by your hiring principal/employer who can indicate the nature of your present performance. You must submit this recommendation from your hiring principal/employer as part of the admission process.

| | | |
|--|-----------|---------|
| Applicant's Name (Please Print) | Signature | |
| Address | City | Country |
| Employer (or Institution/Organization) | | |

To the Evaluator:

The individual named above has made application to the Bachelor of Education Degree Programme. One of the steps of the admission process requires each applicant to obtain a recommendation from his/her principal/employer demonstrating that the applicant has the ability to be successful in a Bachelor's programme. The items listed below concern the applicant's performance.

Please rate the applicant on the following items:

| | | | |
|---|--|----------------------------------|-----------------------------------|
| 1. Attitude toward work | <input type="checkbox"/> Somewhat negative | <input type="checkbox"/> Average | <input type="checkbox"/> Positive |
| 2. Motivation toward work | <input type="checkbox"/> Low | <input type="checkbox"/> Average | <input type="checkbox"/> High |
| 3. Ability to carry out task | <input type="checkbox"/> Low | <input type="checkbox"/> Average | <input type="checkbox"/> High |
| 4. Resourcefulness in identifying and carrying out task | <input type="checkbox"/> Low | <input type="checkbox"/> Average | <input type="checkbox"/> High |
| 5. Emotional Control | <input type="checkbox"/> Low | <input type="checkbox"/> Average | <input type="checkbox"/> High |
| 6. Interpersonal Relationships | <input type="checkbox"/> Low | <input type="checkbox"/> Average | <input type="checkbox"/> High |

7. Most significant strengths _____

8. Most significant weaknesses _____

9. I have known the applicant for _____ years. The applicant has been a member of my staff for _____ years. The applicant has had at least _____ years of teaching experience.

I have known this person [] well [] slightly.

10. In my opinion, the applicant's potential for success in a bachelor's programme is [] good [] average [] poor

11. The applicant has been involved in innovative projects in his or her institution or organization. [] yes [] no

12. The applicant is able to read, write and communicate effectively, using English Language.

[] yes [] no

The person writing the recommendation must complete the following section:

| | |
|------------------------------|-------------------------|
| _____ Signature | _____ Date |
| _____ Name (Please Print) | _____ Position |
| _____ Address | _____ Contact Number |
| _____ | _____ Country |

Please return to

Knox Community College
Admissions Office
Att: Education Department
P.O. Box 52, Spalding, Clarendon
Jamaica, West Indies

KNOX COMMUNITY COLLEGE

Department of Education
P.O. Box 52
Spalding
Clarendon
Jamaica, West Indies

Supervisor/Head of Department Recommendation for admission to the Bachelor of Education Degree Programme

To the Applicant: This form should be completed by your Supervisor, Head of Grade, Form, or applicable department who can indicate the nature of your present performance. You must submit this recommendation from your Supervisor as part of the admission process.

| | |
|---------------------------------------|-------------------------|
| _____ Applicant's Name | _____ Signature |
| _____ Street Address (or District) | _____ City, Country |
| _____ | _____ Contact number |
| _____ Supervisor's Name | |

To the Evaluator:

The individual named above has made application to the Bachelor of Education programme. One of the steps of the admission process requires each applicant to obtain a recommendation from his/her supervisor denoting that the applicant has the ability to be successful in a Bachelor's programme. The items listed below concern the applicant's performance.

Please rate the applicant on the following items:

| | | | |
|---|--|----------------------------------|-----------------------------------|
| 1. Attitude toward work | <input type="checkbox"/> Somewhat negative | <input type="checkbox"/> Average | <input type="checkbox"/> Positive |
| 2. Motivation toward work | <input type="checkbox"/> Low | <input type="checkbox"/> Average | <input type="checkbox"/> High |
| 3. Ability to carry out task | <input type="checkbox"/> Low | <input type="checkbox"/> Average | <input type="checkbox"/> High |
| 4. Resourcefulness in identifying and carrying out task | <input type="checkbox"/> Low | <input type="checkbox"/> Average | <input type="checkbox"/> High |
| 5. Emotional Control | <input type="checkbox"/> Low | <input type="checkbox"/> Average | <input type="checkbox"/> High |
| 6. Interpersonal Relationships | <input type="checkbox"/> Low | <input type="checkbox"/> Average | <input type="checkbox"/> High |

7. Most significant strengths _____

8. Most significant weaknesses _____

9. I have known the applicant for _____ years.

10. In my opinion, the applicant's potential for success in a bachelor's programme is
[] good [] average [] poor

11. The applicant has been involved in innovative projects at his or her institution or organization.

[] yes [] no

12. The applicant is able to read, write and communicate effectively, in English.

[] yes [] no

The person writing the recommendation must complete the following section:

| | |
|-------------------------------|-------------------------|
| _____ Name: (please print) | _____ Date |
| _____ Signature | _____ Position |
| _____ Email Address | _____ Contact Number |
| _____ Organization | _____ Country |

Please return to:

Knox Community College
The Registry
Att: Education Department
P.O. Box 52, Spalding, Clarendon



KNOX COMMUNITY COLLEGE

Education Department
P.O. Box 52, Spalding, Clarendon
Jamaica, West Indies

REQUEST FOR OFFICIAL TRANSCRIPT

Student: Please complete both sections of this form. Mail to your former school/s with appropriate fee. Find out from your school the cost of a transcript if you do not know.

Please send to Knox Community College at the Above Address, an official transcript of my academic work while attending your institution. Please also return the TRANSCRIPT TRANSMITTAL FORM below with the Transcript. Thank you.

A. I attended your school/college from _____ to _____

B. While in attendance, my name on your records was

Last First Middle/Maiden

C. My student identification number was _____

Thank you for your assistance.

TRANSCRIPT TRANSMITTAL FORM

TRN# _____ Date: _____

NAME _____

Last First Middle/Maiden

ADDRESS _____

Street

City Country