

# Application Packet For UO Preliminary Administrator Licensure [PreAL] (Only) Program

**Please note:** This application packet is for those applying to the University of Oregon (UO) Preliminary Administrator Licensure (PreAL) Program who already have, or are currently completing, a master's or higher degree. If you do not have a master's or higher degree and are not presently in a degree program, you will need to apply for the M.Ed. Degree and Preliminary Administrator Licensure Joint Program using the "concurrent MED PreAL application."

The University of Oregon (UO) Preliminary Administrator Licensure Program is currently offered in: Eugene and Salem. The Eugene cohort also serves distance locations, including Central/Eastern Oregon and Portland\*.

*\* Admitted students from Portland can join the Salem cohort or Eugene cohort (via the distance option).*

The PreAL Program is a self-support program. Therefore, credit vouchers received from your school/district cannot be used for this program, when signing up through Academic Extension. As a "licensure only" (non-degree seeking) student, you are not eligible for financial aid, but may be able to obtain alternative financial aid from several funding sources.

## **Admission Requirements**

The University of Oregon offers the Preliminary Administrator Licensure Program as a 26-credit hour, cohort-based program. This course of study has been approved by the Teacher Standards and Practices Commission (TSPC). Recommendation for licensing is based on meeting the hour and content requirements established by TSPC.

To be considered for admission into the Preliminary Administrator Licensure Program, applicants must hold, have held, or be eligible to hold a TSPC license from Oregon, or another state, and verify three years of full-time successful licensed experience.

## **Application Procedures**

The admission deadline for the 2018-19 program:

- Eugene cohort (includes distance locations) and Salem cohort: Friday, March 9, 2018 (extended)

*If all openings are not filled, applications may be accepted after the deadline.*

1. Complete the attached application. Use the checklist preceding the application to ensure you have provided all required application materials to the Preliminary Administrator Licensure Program.

### **Send completed applications to:**

**EMPL - UO College of Education**  
**Attention: Angela Burham, Student Services Coordinator**  
**5267 University of Oregon**  
**Eugene, OR 97403-5267**

2. Keep a copy of all application materials submitted to the UO.

Please note: The number of individuals admitted to the Preliminary Administrator Licensure Program, each year, is limited. Therefore, it may not be possible to admit all individuals who satisfy the admission requirements.

For specific questions about the **application process**, please contact:

Student Services Coordinator

Angela Burham  
EMPL - UO College of Education  
5267 University of Oregon  
Eugene, OR 97403-5267  
541-346-1492  
burham@uoregon.edu

For specific questions about the **PreAL program**, please contact:

Program Administration

Keith Hollenbeck  
Director of Administrator Licensure  
EMPL - UO College of Education  
5267 University of Oregon  
Eugene, OR 97403-5267  
541-346-0804  
khollen@uoregon.edu

Jen Davis  
EMPL - UO College of Education  
5267 University of Oregon  
Eugene, OR 97403-5267  
541-346-2447  
jdavis10@uoregon.edu

PreAL APPLICATION PACKET Checklist

EMPL, UO College of Education  
University of Oregon

The following items must be included with your application. Please check off each item as you include it in your application. Recommendation forms and transcripts can arrive separately.

\_\_\_\_\_ PreAL application form with \$20 check (for application processing) made out to the *University of Oregon*.

\_\_\_\_\_ A clearly written goal statement (approximately 500 words) describing:

- interests and future plans in educational administration
- experience that demonstrates potential for educational leadership

\_\_\_\_\_ A current resumé summarizing your professional experience in education and verifying three (3) years TSPC licensed experience.

\_\_\_\_\_ Three completed "Recommendation for Admission" forms (included in packet), to the extent possible, are from:

- your current or most recent supervisor/administrator
- administrators who can speak to your potential as a school administrator.

\_\_\_\_\_ The completed Character questionnaire.

\_\_\_\_\_ One copy of official or unofficial transcripts of all graduate work (**must show graduate degrees earned**) and major undergraduate work.

\_\_\_\_\_ A copy of your current TSPC license (Oregon) or license from another state. If you do not have a paper License to copy, please provide a screen shot of your license history. To do so, go to TSPC's home page. In the left menu, click "Educator Look Up" which will take you to "TSPC Educator License Inquiry." Type in your name (and birthdate if you have a common name). When your licensure history screen shows up, print it.

\_\_\_\_\_ Fingerprint Packet Inquiry form. **Please click one of the two options.**

**APPLICATION FOR ADMISSION**  
Preliminary Administrator Licensure (PreAL) Program

EMPL, UO College of Education  
University of Oregon

**GENERAL INFORMATION**

Applicant Name: \_\_\_\_\_  
Last Name                      First Name                      Middle

Previous names used: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

|                            |                                   |                     |                          |                   |  |
|----------------------------|-----------------------------------|---------------------|--------------------------|-------------------|--|
| Optional : Ethnic Identity |                                   |                     |                          |                   |  |
| Asian or Pacific Islander  | American Indian or Alaskan Native | White, non-Hispanic |                          |                   |  |
| Black                      | Hispanic/Latino/Chicano           | Other _____         | Decline Response         |                   |  |
| Male                       | Female                            | No response         | Birthday: ____/____/____ | Citizenship _____ |  |

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Current Position: \_\_\_\_\_ School: \_\_\_\_\_ District: \_\_\_\_\_

**TRANSCRIPTS TO BE SUBMITTED**

Please submit transcripts (official or unofficial) of all completed graduate work, and transcripts of the majority of your undergraduate work.

| Institution (Name/Location): | Dates of Enrollment: | Degree/Major: |
|------------------------------|----------------------|---------------|
| _____                        | _____                | _____         |
| _____                        | _____                | _____         |
| _____                        | _____                | _____         |

**TSPC LICENSE**

Do you have a current TSPC License? \_\_\_ Yes \_\_\_ No Please include a copy of your TSPC license with your application.

**REFERENCES**

Three recommendations are required for admission to the PreAL program. To the extent possible, the recommendations should be from the following: current administrator or supervisor; administrators who can speak to your potential as a school administrator. **You (the applicant) are responsible for sending the 'Recommendation for Admission' form (provided in application packet) to each reference. Please list your references below.**

**NAME:**

**TITLE:**

**ADDRESS/PHONE:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PROFESSIONAL EXPERIENCE IN EDUCATION (or related professional experience):**

Please attach a resumé that summarizes your professional experience in education or a related field. For each position, provide the job title, a summary of the job responsibilities (including leadership experiences), the school, the district, and the dates of employment. We will use the information provided in your resume to verify your three (3) years licensed educational experience.

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Return application form and materials, along with a \$20 check made payable to the *University of Oregon*, to:

**EMPL - UO College of Education**  
**Attn: Angela Burham, Student Services Coordinator**  
**5267 University of Oregon**  
**Eugene, OR 97403-5267**  
**Ph: (541) 346-1492 Email: burham@uoregon.edu**

**GOAL STATEMENT**

Preliminary Administrator Licensure (PreAL) Program

EMPL, UO College of Education  
University of Oregon

Applicant Name: \_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Write a clear goal statement that addresses the following:

1. Your interests and future plans in educational administration.
2. Your professional experience that demonstrates potential for educational leadership

The statement should be typed, approximately 500 words. Attach additional sheets as needed.

**RECOMMENDATION FOR ADMISSION**

Preliminary Administrator Licensure (PreAL) Program

EMPL, UO College of Education  
University of Oregon

**Applicant:**

I expressly waive any rights to have access to this recommendation under the Family Rights and Privacy Act of 1974, P.L. 93-380, the University of Oregon Student Record Policy, and any other law, regulation, or policy.

Signature: \_\_\_\_\_ Date: \_\_/\_\_/\_\_

Your name has been given as a reference by \_\_\_\_\_ who is applying for admission to the *Preliminary Administrator Licensure Program* at the University of Oregon. Please assess the candidate's potential as a future administrator.

Your Name: \_\_\_\_\_ Date: \_\_/\_\_/\_\_

Position: \_\_\_\_\_ Signature: \_\_\_\_\_

1. How long have you known the applicant, and in what capacity? \_\_\_\_\_

\_\_\_\_\_

2. Describe the strengths of the applicant. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. What do you see as the applicant's professional development needs? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**-over-**

For each of the following, check the appropriate box:

| <b>INTELLECTUAL CAPABILITY</b>     | NO BASIS | POOR | MARGINAL | AVERAGE | GOOD | EXCELLENT |
|------------------------------------|----------|------|----------|---------|------|-----------|
| Analyzing                          |          |      |          |         |      |           |
| Writing                            |          |      |          |         |      |           |
| Synthesizing                       |          |      |          |         |      |           |
| <b>EDUCATIONAL EXPERTISE</b>       | NO BASIS | POOR | MARGINAL | AVERAGE | GOOD | EXCELLENT |
| Curriculum                         |          |      |          |         |      |           |
| Instruction                        |          |      |          |         |      |           |
| Student Assessment                 |          |      |          |         |      |           |
| <b>ABILITY TO WORK WITH OTHERS</b> | NO BASIS | POOR | MARGINAL | AVERAGE | GOOD | EXCELLENT |
| Teachers                           |          |      |          |         |      |           |
| Administrators                     |          |      |          |         |      |           |
| Parents                            |          |      |          |         |      |           |
| Students                           |          |      |          |         |      |           |
| <b>ADMINISTRATIVE SKILLS</b>       | NO BASIS | POOR | MARGINAL | AVERAGE | GOOD | EXCELLENT |
| Ability to Organize                |          |      |          |         |      |           |
| Effective Delegation               |          |      |          |         |      |           |
| Flexibility                        |          |      |          |         |      |           |
| Time Management                    |          |      |          |         |      |           |
| <b>LEADERSHIP SKILLS</b>           | NO BASIS | POOR | MARGINAL | AVERAGE | GOOD | EXCELLENT |
| Problem Solving                    |          |      |          |         |      |           |
| Creativity                         |          |      |          |         |      |           |
| Communication                      |          |      |          |         |      |           |

4. Based on your knowledge of the applicant's experience and background, summarize his/her potential as an educational administrator (you may attach an additional sheet if necessary).

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**Please return this form by US Mail or Email:**

**US Mail:**

EMPL - UO College of Education  
 Attention: Angela Burham, Student Services Coordinator  
 5267 University of Oregon  
 Eugene, OR 97403-5267  
 Ph.: (541) 346-1492

**Email:**

burham@uoregon.edu



**RECOMMENDATION FOR ADMISSION**

Preliminary Administrator Licensure (PreAL) Program

EMPL, UO College of Education  
University of Oregon

**Applicant:**

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Your name has been given as a reference by \_\_\_\_\_ who is applying for admission to the *Preliminary Administrator Licensure Program* at the University of Oregon. Please assess the candidate's potential as a future administrator.

Your Name: \_\_\_\_\_ Date: \_\_/\_\_/\_\_

Position: \_\_\_\_\_ Signature: \_\_\_\_\_

1. How long have you known the applicant, and in what capacity? \_\_\_\_\_

2. Describe the strengths of the applicant. \_\_\_\_\_

3. What do you see as the applicant's professional development needs? \_\_\_\_\_

**-over-**

For each of the following, check the appropriate box:

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|------------------------------------|----------|------|----------|---------|------|-----------|
| Analyzing                          |          |      |          |         |      |           |
| Writing                            |          |      |          |         |      |           |
| Synthesizing                       |          |      |          |         |      |           |
| <b>EDUCATIONAL EXPERTISE</b>       | NO BASIS | POOR | MARGINAL | AVERAGE | GOOD | EXCELLENT |
| Curriculum                         |          |      |          |         |      |           |
| Instruction                        |          |      |          |         |      |           |
| Student Assessment                 |          |      |          |         |      |           |
| <b>ABILITY TO WORK WITH OTHERS</b> | NO BASIS | POOR | MARGINAL | AVERAGE | GOOD | EXCELLENT |
| Teachers                           |          |      |          |         |      |           |
| Administrators                     |          |      |          |         |      |           |
| Parents                            |          |      |          |         |      |           |
| Students                           |          |      |          |         |      |           |
| <b>ADMINISTRATIVE SKILLS</b>       | NO BASIS | POOR | MARGINAL | AVERAGE | GOOD | EXCELLENT |
| Ability to Organize                |          |      |          |         |      |           |
| Effective Delegation               |          |      |          |         |      |           |
| Flexibility                        |          |      |          |         |      |           |
| Time Management                    |          |      |          |         |      |           |
| <b>LEADERSHIP SKILLS</b>           | NO BASIS | POOR | MARGINAL | AVERAGE | GOOD | EXCELLENT |
| Problem Solving                    |          |      |          |         |      |           |
| Creativity                         |          |      |          |         |      |           |
| Communication                      |          |      |          |         |      |           |

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**RECOMMENDATION FOR ADMISSION**

Preliminary Administrator Licensure (PreAL) Program

EMPL, UO College of Education  
University of Oregon

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Position: \_\_\_\_\_ Signature: \_\_\_\_\_

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\_\_\_\_\_

2. Describe the strengths of the applicant. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. What do you see as the applicant's professional development needs? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**-over-**

For each of the following, check the appropriate box:

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|------------------------------------|----------|------|----------|---------|------|-----------|
| Analyzing                          |          |      |          |         |      |           |
| Writing                            |          |      |          |         |      |           |
| Synthesizing                       |          |      |          |         |      |           |
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| Curriculum                         |          |      |          |         |      |           |
| Instruction                        |          |      |          |         |      |           |
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| Teachers                           |          |      |          |         |      |           |
| Administrators                     |          |      |          |         |      |           |
| Parents                            |          |      |          |         |      |           |
| Students                           |          |      |          |         |      |           |
| <b>ADMINISTRATIVE SKILLS</b>       | NO BASIS | POOR | MARGINAL | AVERAGE | GOOD | EXCELLENT |
| Ability to Organize                |          |      |          |         |      |           |
| Effective Delegation               |          |      |          |         |      |           |
| Flexibility                        |          |      |          |         |      |           |
| Time Management                    |          |      |          |         |      |           |
| <b>LEADERSHIP SKILLS</b>           | NO BASIS | POOR | MARGINAL | AVERAGE | GOOD | EXCELLENT |
| Problem Solving                    |          |      |          |         |      |           |
| Creativity                         |          |      |          |         |      |           |
| Communication                      |          |      |          |         |      |           |

4. Based on your knowledge of the applicant's experience and background, summarize his/her potential as an educational administrator (you may attach an additional sheet if necessary).

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 5267 University of Oregon  
 Eugene, OR 97403-5267  
 Ph.: (541) 346-1492

**Email:**

burham@uoregon.edu

Preliminary Administrator Licensure (PreAL) Program  
Fingerprint Packet Inquiry

TSPC requires that students complete fingerprinting procedures before beginning a practicum experience. Whether or not you have ever submitted a fingerprint packet to TSPC, please complete the form below and return it to the UO Administrator Licensure Program along with your application.

**Please note:** You must have had fingerprint clearance within the last three years unless your current license is active. If your fingerprint clearance is more than three years old, and your license is inactive, you must have new fingerprints taken.

CHECK ONE:

I am not submitting a fingerprint packet, because I have already completed fingerprinting procedures for TSPC as stated above.

I will submit a fingerprint packet **prior to beginning** my PreAL practicum.

**By signing this form, I verify that I understand all of the above.**

\_\_\_\_\_  
Signature

Name \_\_\_\_\_ Date \_\_\_\_\_

Current Oregon license(s) held: \_\_\_\_\_

Home phone number \_\_\_\_\_ Work phone number \_\_\_\_\_

**NOTE: If you need to complete your fingerprint packet, please contact:**

Richelle Krotts  
Licensure Analyst/Student Records Coordinator

**Phone:** (541) 346-3528

**Email:** [coelicensure@uoregon.edu](mailto:coelicensure@uoregon.edu)

**Address:**  
1215 University of Oregon  
Eugene OR 97403-1215

**Office Location:**  
130G HEDCO Education Bldg

**Lokey College of Education**  
**Character Questions**  
**Admission into a Licensure Program**

Listed below are the character questions that are extracted from the Application for License that is a requirement for the issuance of a license. The intent of this form is to pre-qualify you for entrance into a licensure program. **An Oregon license will be denied for the conviction of any of the crimes listed on the following page.**

CHARACTER QUESTIONS - You must answer each question either "yes" or "no" whichever is true. Explain each "yes" answer in detail on a separate sheet, signed and dated by you.

**Note: Any false statement knowingly made in this application is grounds for revocation or suspension of your license. If in doubt, disclose and explain rather than conceal.**

1. Have you ever left any educational or school-related employment, voluntarily or involuntarily, while the subject of an inquiry, review or investigation of alleged misconduct? Have you ever left educational or school-related employment when you had reason to believe an investigation for misconduct was underway or imminent? 1. \_\_\_\_\_
2. Are you currently the subject of an inquiry, review, or investigation for alleged misconduct or alleged violation of professional standards of conduct by either an employer or a licensure agency? 2. \_\_\_\_\_
3. Have you ever been placed on leave by your employer for any alleged misconduct? 3. \_\_\_\_\_
4. Have you ever had any adverse action taken on a *professional* certificate, license or charter school registration? Have you ever been placed on probationary status for alleged misconduct while holding professional license, certificate, registration, or credential? 4. \_\_\_\_\_
5. Have you ever been denied a professional license for which you applied or granted a professional license on a conditional or probationary basis for any alleged misconduct? 5. \_\_\_\_\_
6. Have you ever surrendered a professional license of any kind before its expiration? 6. \_\_\_\_\_
7. Have you ever been disciplined by any public agency responsible for licensure of any kind, including but not limited to educational licensure? 7. \_\_\_\_\_
8. Have you ever been convicted or been granted a diversion or conditional discharge by any court for any: (a) Felony; or (b) Misdemeanor; or (c) Major traffic violation including but not limited to: driving under the influence of intoxicants or drugs; reckless driving; fleeing from or attempting to elude a police officer; driving while your license was suspended, revoked or used in violation of any license restriction; or failure to perform the duties of a driver or witness at an accident? 8. \_\_\_\_\_
9. Have you ever been arrested or cited for any offense listed in section (8) above which is still pending in the courts? This includes any diversion, conditional discharge or postponed adjudication that has not been dismissed by the courts at the time this application is signed. 9. \_\_\_\_\_
10. Have you ever had any civil judgment or other court order, including but not limited to a restraining order, entered against you resulting from allegations of abuse, assault, battery, harassment, intimidation, neglect, stalking, or other threatening behavior toward other persons? 10. \_\_\_\_\_

**NOTE: If you answer "no" to questions 8 through 10 based upon an "expungement," and/or an order "setting aside" or "sealing" of a record of a conviction or conditional discharge, you must personally verify with the court directly involved that the expungement, setting aside, or sealing actually has taken place. An erroneous belief that a conviction has been expunged, set aside, or sealed, when in fact it has not, will be deemed a false statement.**

**I hereby certify that the information submitted on or relating to this form is true and correct.**

Printed Name \_\_\_\_\_

Signature of the Applicant \_\_\_\_\_ Date \_\_\_\_\_

**NOTE: Under ORS 342.143 and 342.175, Oregon License shall be denied or revoked for conviction of any of the following crimes or for comparable crimes in another state.**

| <b>ORS Number</b> | <b>Description of Crime</b>   |
|-------------------|---|
| 163.095           | Aggravated Murder   |
| 163.115           | Murder  |
| 163.185           | Assault in the First Degree   |
| 163.235           | Kidnapping in the First Degree  |
| 163.355           | Rape in the Third Degree  |
| 163.365           | Rape in the Second Degree   |
| 163.375           | Rape in the First Degree  |
| 163.385           | Sodomy in the Third Degree  |
| 163.395           | Sodomy in the Second Degree   |
| 163.405           | Sodomy in the First Degree  |
| 163.408           | Unlawful Sexual Penetration in the Second Degree  |
| 163.411           | Unlawful Sexual Penetration in the First Degree   |
| 163.415           | Sexual Abuse in the Third Degree  |
| 163.425           | Sexual Abuse in the Second Degree   |
| 163.427           | Sexual Abuse in the First Degree  |
| 163.435           | Contributing to the Sexual Delinquency of a Minor   |
| 163.445           | Sexual Misconduct   |
| 163.465           | Public Indecency  |
| 163.515           | Bigamy  |
| 163.525           | Incest  |
| 163.547           | Child Neglect in the First Degree   |
| 163.575           | Endangering the Welfare of a Minor  |
| 163.670           | Using Child in Display of Sexually Explicit Conduct   |
| 163.675           | Sale or Exhibition of Visual Reproduction of Sexual Conduct by Child                        |
| 163.680           | Paying for Viewing Sexual Conduct Involving a Child   |
| 163.684           | Encouraging Child Sexual Abuse in the First Degree  |
| 163.686           | Encouraging Child Sexual Abuse in the Second Degree   |
| 163.687           | Encouraging Child Sexual Abuse in the Third Degree  |
| 163.688           | Possession of Materials Depicting Sexually Explicit Conduct of a Child in the First degree  |
| 163.689           | Possession of Materials Depicting Sexually Explicit Conduct of a Child in the Second Degree |
| 164.325           | Arson in the First Degree   |
| 164.415           | Robbery in the First Degree   |
| 166.005           | Treason   |
| 166.087           | Abuse of Corpse in the First Degree   |
| 167.007           | Prostitution  |
| 167.012           | Promoting Prostitution  |
| 167.017           | Compelling Prostitution   |
| 167.062           | Sadomasochistic Abuse or Sexual Conduct in Live Show  |
| 167.065           | Furnishing Obscene Materials to Minors  |

|                |  |
|----------------|--|
| <b>167.070</b> | <b>Sending Obscene Materials to Minors</b>   |
| <b>167.075</b> | <b>Exhibiting an Obscene Performance to a Minor</b>  |
| <b>167.080</b> | <b>Displaying Obscene Materials to Minors</b>  |
| <b>167.087</b> | <b>Disseminating Obscene Materials</b>   |
| <b>167.090</b> | <b>Publicly Displaying Nudity or Sex for Advertising Purposes</b>                                      |
| <b>475.995</b> | <b>Distribution of Controlled Substance to Minors</b>  |
| <b>475.999</b> | <b>Manufacture or Delivery of Controlled Substance to Minor or Student within 1,000 Feet of School</b> |

**SDS1036 070795**  
(Revised 11/29/10)