**Click in the white spaces to enter your information.**

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| **Nebraska Department of Education Rule 20 Report** |
| **Educator Preparation Program Review**   |  |  | | --- | --- | | Name of institution |  | | Date of review |  | | Contact Person |  | | Phone/Fax |  | | Email |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | | Institution Accreditation Status: | | | | | |  |  | National |  | State | |