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2025 Schedule M1CMD, Credit for Attaining Master's Degree in Teacher's Licensure Field

You may qualify for this credit if all of these are true:

- You began a Master of arts or science degree program after June 30, 2017
- Your master's degree program did not include pedagogy or a pedagogy component
- You held a teaching license from the Minnesota Professional Educator Licensing and Standards Board (PELSB) when you began and completed the program
- You completed the program in taxable year 2025

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60 61 62 You completed the master's degree program in a core content area directly related to your licensure field. Core content areas are reading, English or language arts, mathematics, science, foreign languages, civics and government, economics, arts, history, and geography

19	See the instructions for additional qualificatio	ns.		19
20		·		20
21	OUR FIRST NAME, INITXXXX YOUR LAST NAMEXXXXXXXXXXXX Last Name and Initial		999999999 Social Security Number	- 21
22	Tour First Name and mittal	Last Name	Social Security Number	22
23	Minacata DELCO Licano de Infrancation			23
24	Minnesota PELSB Licensure Information			24
25		1 0 3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3/3	9999999999999	25
26	FUNCTION DESCRIPTIONXXXXX 12XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		File Folder Number	26
27				27
28	Master's Degree Program Information			28
29	indice obegies rogium mornidaem			29
30	ACCREDITED COLLEGE UNIVER	DEGREE PROGRAMXX 11223333	11223333	30
31	Accredited College/University	Degree Program Program Start Date	Program Completion Date	31
32				32
33	X			33
34	Check if you had a teaching license when you	began the master's program and when you completed the	ne program	34
35	Check if your program did not contain a peda			35
36	Check if your program did not contain a peda	gogy component (see instructions)		36
37		Roun	d amounts to the nearest whole dollar	- 37 - 39
39	All Applicants			38
40		es, books, and instructional materials for the program	1 ■ 12345678	39
41	1 Jotal amount paid in tuition and required le	es, books, and instructional materials for the program		40
42	2 Total amount of scholarships received in all	2 1 2345678	3 42	
43		, , , , , , , , , , , , , , , , , , , ,		43
44	3 Total employer reimbursement received in a	3 ■ 12345678	}	
45				45
46	4 Add lines 2 and 3		4 12345678	3 46
47				47
48	5 Subtract line 4 from line 1. If zero or less, ST	5 12345678	48	
49				49
50	6 Enter the lesser of line 5 or \$2,500		6 <u>12345678</u>	50
51	51 Full-Year Residents: Also enter this amount on line 8 of Schedule M1C.			51
52				52
53				53
54	Part-Year Residents and Nonresidents		10045650	54
55	7 Enter the percentage from line 30 of Schedu	le M1NR	7 12345678	55
56			10045670	56
57	8 Multiply line 6 by line 7. Enter the result her	e and on line 8 of Schedule M1C	<u>8</u> 12345678	57
58				58
59	Include this schedule with your Form M1.			59

8 10 12 14 16 18 20 22 24 26 28 30 32 34 36 38 40 42 44 46 48 50 52 54 56 58 60 62 64 66 68 70 72 74 76 78 80 824 84