

ALABAMA STATE DEPARTMENT OF EDUCATION TEACHER CERTIFICATION SECTION OFFICE OF TEACHING AND LEADING 5215 GORDON PERSONS BUILDING POST OFFICE BOX 302101 MONTGOMERY, AL 36130-2101 Telephone: (334) 353-8567 E-mail: tcert@alsde.edu

This section must be completed by the employing Alabama school system or nonpublic school.

School System Code: ___ ___

Nonpublic

School Code: ___

Application for the Renewal of a Professional Educator Certificate or a Renewable Career and Technical Certificate

CHECK ONE:

- □ Submitted by an Alabama Local Education Agency (LEA): Name of LEA:
- □ Submitted by an eligible nonpublic school: Name of school: ____
- □ Submitted by applicant

If a retired teacher option is being used to renew a Professional Educator Certificate, the Application for Renewal of a Professional Educator Certificate Based on Special Provisions for Some Retired Teachers (Form RTD) must be submitted.

The Teacher Certification Section of the Office of Teaching and Leading is unable to determine eligibility for certificate renewal until ALL components of the application packet, as defined in Section I., have been received. Applications will not be assigned to a certification specialist until at least this completed Form REN, the \$30.00 application fee, and background clearance (*if applicable*) have been received. The submission of supporting documents ONLY (e.g., Supplement EXP, official transcripts) does not constitute making application for certification.

<u>Requirements</u> for the renewal (continuation/reinstatement) of the Professional Educator Certificates or renewable Career and Technical Certificates may be found on summary sheets entitled "Renewal of Professional Educator Certificates in Areas OTHER THAN Administration and/or Supervision," "Renewal of Professional Educator Certificates in Areas of Administration and/or Supervision," **OR** "Renewal of Career and Technical Certificates (Type, Level, and Specialty Area Certificates)." Summary sheets may be found at internet web site <u>http://www.alsde.edu/CertificationForms</u> (*click Certificate Renewal*).

Incomplete forms will delay the review of the application packet. APPLICATION FORMS ARE NOT ACCEPTED BY FAX OR E-MAIL.

I. APPLICATION PACKET:

Please check boxes below to ensure that ALL components of the application packet will be submitted to the Teacher Certification Section of the Office of Teaching and Leading:

- Application for Renewal of a Professional Educator Certificate or a Renewable Career and Technical Certificate (Form REN).
- A nonrefundable \$30.00 application fee. The fee may be paid by cashier's check or money order made payable to the Alabama State Department of Education or through the Alabama State Department of Education Teacher Certification Online Payment System, with a major credit card, at <u>www.alabamainteractive.org/education</u> (a \$4.00 transaction fee will be applied). No personal checks will be accepted. The cashier's check, money order, or copy of the receipt verifying the confirmation number for the online payment must accompany the application.
- □ If not previously cleared, be fingerprinted for a criminal history background check and cleared by the Alabama Bureau of Investigation (ABI) and the Federal Bureau of Investigation (FBI) through the Teacher Certification Section of the Office of Teaching and Leading. Instructions regarding the fingerprint process may be obtained at <u>www.cogentid.com/AL</u> or by calling (866) 989-9316 (toll free). The application for renewal will not be reviewed until the background check has been completed.

Mark all of the documentation submitted/to be submitted, as applicable, to verify requirements for renewal.

□ Verification of clock hours of allowable professional development earned:

□ *Certificates of Completion* □ *STI PD printout of Training History* □ *Supplement EXP* □ *Official transcript(s)* □ Verification of Professional Learning Units (PLUs) earned:

 \Box STI PD printout of Training History \Box Official transcript(s)

- □ Supplement EXP verifying full-time educational experience
- Official transcript(s) verifying allowable credit earned
- D Photocopy of the certificate verifying initial issuance of National Board for Professional Teaching Standard (NBPTS) Certification
- Dehotocopy of a valid Alabama Cosmetology Instructor License (applicable for certain Career and Technical Certificates)
- D Photocopy of a valid license or certificate as a healthcare practitioner (applicable for certain Career and Technical Certificates)

For information regarding allowable credit, educational experience, allowable professional development, Professional Learning Units (PLUs), certificates, or licenses, refer to the appropriate renewal summary sheet.

II. PERSONAL DATA (TYPE OR PRINT LEGIBLY, USING BLACK INK, WHEN COMPLETING THIS FORM):

Title (e.g., Mr.)	First		Mid	ldle	Ma	iden		Last		<u>Suffix (e.g., Jr.)</u>
St	treet/Apt./P.	O. Box/Route and B	ox		City		State		ZIP Co	de
Cell Telephone		Home Tele	phone	Work Te	lephone		Е	-mail Address		
()		()		()						
Social Security Nu	ımber	Date of Birth (m	n-dd-yyyy)			r				
							FOR STA	TISTICAL PURPO	SES ONLY	
		-	-			Ethnic Origin (01) Hispan (02) Not His Gender (choose	ic Latino spanic Latino	$ \begin{array}{c} \hline & (01) \text{ White} \\ \hline & (02) \text{ Black or } A \\ \hline & (04) \text{ American} \end{array} $	or more, regardless African American Indian or Alaska Na	
						□ (F) Female □ (M) Male	/	□ (05) Asian □ (08) Native Ha	waiian or Other Paci	ific Islander

NOTE: It is the applicant's responsibility to keep all personal data on file in the Teacher Certification Section of the Office of Teaching and Leading current. It is imperative that you notify this Office of any change of address.

Name: _

III. CHECK ONE:

Continuation: To continue a certificate is to update the certificate without allowing it to lapse.

To **continue** Professional Educator Certificates or Renewable Career and Technical Certificates requirements must be completed during the valid period of the certificate but no later than June 30 of the calendar year of its expiration. The application and fee must be received in the Teacher Certification Office no later than June 30 of the calendar year of the certificate.

Reinstatement: To reinstate a certificate is to make valid a certificate that is no longer current.

IV. RECORD OF EDUCATION (*Attach an additional sheet if needed*):

NAME OF COLLEGE OR UNIVERSITY	LOCATION	DATES ATTENDED	DEGREE AND MAJOR

V. EDUCATIONAL EXPERIENCE

(Do not include student teaching, substitute, or teacher aide experience. If none, enter the word "NONE" below. List your most recent experience first and attach an additional sheet if needed.)

DA Beginning Month/Year	TES Ending Month/Year	NAME AND LOCATION OF SCHOOL/SCHOOL SYSTEM	GRADE(S) AND SUBJECT(S) TAUGHT OR INSTRUCTIONAL SUPPORT POSITION (e.g., counselor, principal) HELD		

VI. RECORD OF LAST ALABAMA TEACHER'S CERTIFICATE(S) ISSUED

NAME(S) OF CERTIFICATE(S)	VALID PERIOD	NAME IN WHICH CERTIFICATE WAS ISSUED

VII. RECORD OF CERTIFICATE(S), INCLUDING ALTERNATIVE CERTIFICATES, ISSUED IN OTHER STATES

(List ALL certificates issued by each state. Attach an additional sheet if needed. If none, enter the word "NONE" below.)							
NAME OF STATE(S)	NAME(S) OF CERTIFICATE(S)	AREA(S) OF CERTIFICATE(S)	VALID PERIOD				
	(e.g., Standard, Alternative, Provisional)	(e.g., elementary education, counselor)	(m/d/yy-m/d/yy)				

VIII. ALABAMA EDUCATOR CERTIFICATION TESTING PROGRAM (AECTP): Test(s) will be prescribed upon review of the complete application packet, *if applicable*.

Individuals reinstating a Professional Educator Certificate(s), that has lapsed for more than six months from the expiration date, will be required to successfully meet the current requirements of the basic skills assessments and subject assessment(s) of the Alabama Educator Certification Testing Program (AECTP).

□ Basic Skills Assessments:

Date Assessments Taken or to be Taken

□ Subject Assessment(s):

Date Assessments Taken or to be Taken

Number and Name of Assessment(s)

IX. DECLARATION

- A. CITIZENSHIP OR NATIONAL STATUS (Per Alabama Act No. 2011-535, as amended by Alabama Act No. 2012-491)
 - □ Yes □ No I declare that I am a citizen of the United States; OR
 - □ Yes □ No I declare that I am an alien lawfully present in the United States.

I understand that if at any time it is determined by the Alabama State Department of Education that I am not lawfully present in the United States, the Alabama State Department of Education will deny this benefit or will terminate this benefit.

I understand that in accordance with Ala. Code 1975 § 31-13-7 (h) "Any person who knowingly makes a false, fictitious, or fraudulent statement or representation in a declaration executed pursuant to subsection (g) shall be guilty of perjury in the second degree pursuant to Section 13A-10-102."

Name:

B. SPOUSE OF ACTIVE DUTY MILITARY PERSONNEL (Per Alabama Act No. 2012-533)

- This section is to be completed for spouses of military personnel who would like to request an expedited review of the certification application packet.
- □ Yes □ No I am married to and living with an active duty member of the United States Armed Forces who has been relocated and stationed in Alabama under official military orders.

Social Security Number:

PERSONAL DATA OF THE ACTIVE DUTY MEMBER OF THE UNITED STATES ARMED FORCES:

Title (e.g., Mr.)	First		Mi	ddle	Maiden	 Last	Suffix (e.g., Jr.)
Social Secu	irity Number	Date of Birth	(mm-dd-yyyy)	1			
-	-	-	-				

I understand that this request to review my file on an expedited basis does not exclude me from meeting ANY Alabama teacher certification requirements, including testing.

C. PROFESSIONAL STATUS AND CRIMINAL HISTORY INFORMATION

Check "yes" or "no" for each question below. "YES" responses require an attached explanation and any additional supporting documentation (e.g. court certified copies of judgment, conviction, and sentencing).

READ CAREFULLY

- □ Yes □ No Have you ever had any adverse action (e.g. warning, reprimand, suspension, revocation, denial, voluntary surrender) taken against a professional certificate, license or permit issued by an agency <u>other than the Alabama State Department of Education</u>?
- □ Yes □ No Are you currently the subject of an investigation involving a violation of a profession's laws, rules, standards or Code of Ethics by an agency <u>other than the Alabama State Department of Education</u>?
- 🗆 Yes 🗖 No 👘 Are you currently the subject of an investigation involving sexual misconduct or physical harm to a child?
- 🗆 Yes 🗖 No 👘 Have you ever been convicted of, or entered a plea of no contest to a felony or misdemeanor other than a minor traffic violation?
- \Box Yes \Box No Are you the subject of a pending investigation involving a criminal act?

I understand that I must meet all Alabama certification requirements in effect on the date the application and fee are received in the Teacher Certification Section of the Office of Teaching and Leading and that it is my responsibility to keep all personal data on file in the Teacher Certification Section of the Office of Teaching and Leading current. I certify that all information pertaining to this application is true and correct.

FAILURE TO SUBMIT ACCURATE INFORMATION MAY RESULT IN REVOCATION OR NONISSUANCE OF YOUR CERTIFICATE.

Date

Signature of Applicant