

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

This section must be completed by the Alabama college/university.

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Institution Code: 5 2 2 - 0 0 0 0

## Application for Alabama Certification Through the State-Approved Educator Preparation Program Approach

### Application *and* Summary of Requirements



#### Alabama State Department of Education *Educator Certification Section*

5215 Gordon Persons Building  
Post Office Box 302101  
Montgomery, AL 36130-2101

Telephone: (334) 694-4557

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**TYPE OR USE BLACK INK WHEN COMPLETING THIS FORM.****PERSONAL DATA** (To be completed by the applicant. **\*REQUIRED FIELDS**):

Title (e.g., Mr.)	*First	*Middle	Maiden	*Last	Suffix
*Street/Apt./P.O. Box/Route and Box			*City	*State	*ZIP Code
*Cell Telephone		Home Telephone		Work Telephone	
( )		( )		( )	
*Social Security Number		ALSDE ID		*Date of Birth (mm-dd-yyyy)	
*E-mail Address					
<b>FOR STATISTICAL PURPOSES ONLY</b>					
<b>Gender</b> (choose one) <input type="checkbox"/> (F) Female <input type="checkbox"/> (M) Male		<b>Ethnic Origin</b> (choose one) <input type="checkbox"/> (01) Hispanic Latino <input type="checkbox"/> (02) Not Hispanic Latino		<b>Race</b> (choose one or more, regardless of Ethnicity) <input type="checkbox"/> (01) White <input type="checkbox"/> (02) Black or African American <input type="checkbox"/> (04) American Indian or Alaska Native <input type="checkbox"/> (05) Asian <input type="checkbox"/> (08) Native Hawaiian or Other Pacific Islander	

**SPOUSE OF OR ACTIVE-DUTY MILITARY PERSONNEL**

(Per Alabama Act No. 2012-533). This section is to be completed for spouses of active-duty military personnel or active-duty 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

**OR**

Yes  No I am an active-duty member of the United States Armed Forces who has been relocated and stationed in Alabama under official military orders.

**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.**

**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 (\*REQUIRED FIELDS)**

- 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 **other than the Alabama State Department of Education**?
- 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 **other than the Alabama State Department of Education**?
- Yes  No \* Are you currently the subject of an investigation involving sexual misconduct or physical harm to a child?
- Yes  No \* Have you ever resigned from a position rather than face disciplinary action?
- 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?
- Yes  No \* Are you the subject of a pending investigation involving a criminal act?

**RECORD OF EDUCATION**

Name of College/University	Location	Dates Attended	Degree and Major

**EDUCATIONAL EXPERIENCE**

(Do not include student teaching, substitute, or teacher aide experience. If none, enter none. List recent experience first.)

Dates		Name and Location of School/School System	Grade(s) And Subject(s) Taught Or Instructional Support Positions (e.g., counselor, principal) Held
Beginning (MM/YY)	Ending (MM/YY)		

**GENERAL INFORMATION**

Application for the Professional Educator Certificate or Professional Leadership Certificate is made by the applicant, **in conjunction with the Alabama college/university**, upon completion of all requirements of the State-approved educator preparation program.

**APPLICATION PACKET CHECKLIST**

**APPLICATION FORMS AND SUPPORTING DOCUMENTS ARE NOT ACCEPTED BY FAX OR E-MAIL.** An application packet must include the items listed below:

- Supplement CIT with supporting documentation verifying United States citizenship or lawful presence in the United States.
- Form NAL Application for Alabama Certification Through the State-Approved Educator Preparation Program Approach.
- A \$30.00 **nonrefundable** application fee. Each additional certificate for which an applicant is determined to be eligible will require a \$30.00 nonrefundable fee for issuance. **Neither personal checks nor cash will be accepted.**
  - The fee must 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 Educator Certification Online Payment System, with a major credit card, at [www.alabamainteractive.org/education](http://www.alabamainteractive.org/education) (a \$4.00 transaction fee will be applied).
  - The cashier's check, money order, or copy of the receipt verifying the confirmation number for the online payment must accompany the application.

**NOTE:** The above documents (Supplement CIT, Form NAL, and fee verification) are to be forwarded by the applicant to the Certification Officer of the school/college/division of education at the Alabama college/university where the State-approved educator preparation program is being completed or was completed. The Certification Officer will attach a completed Supplement NAI Recommendation for Certification by the Alabama College/University and other documentation (official transcripts, State Board of Education approved checklist(s), verification of experience on Supplement EXP, etc.) to support the recommendation for certification. The complete application packet will then be forwarded by the Certification Officer to the Educator Certification Section of the Alabama State Department of Education (ALSDE).

**BACKGROUND CLEARANCE**

- Background clearance is based on a fingerprint review.
  - Applicants may verify whether their Alabama State Bureau of Investigation (ASBI) and Federal Bureau of Investigation (FBI) criminal history background checks have been completed and whether they are suitable and fit to teach under state law at <https://tcert.alsde.edu/Portal>.
  - Applicants for initial certification, additional certification, and certificate renewal **who have not been cleared** by both the ASBI and FBI through the Educator Certification Section of the ALSDE are required to be fingerprinted for a criminal history background check through the ASBI and FBI.
  - Instructions regarding the fingerprint process are available through Gemalto Cogent at [https://www.aps.gemalto.com/al/index\\_adeNew.htm](https://www.aps.gemalto.com/al/index_adeNew.htm) or by calling (866) 989-9316.

**TEST REQUIREMENTS**

For certification through the Alabama State-Approved Educator Preparation Program Approach, applicants must meet all requirements of the Alabama Educator Certification Assessment Program (AECAP) in effect on the date the application is received in the Educator Certification Section. The applicant should consult with the Certification Officer of the school/college/division of education at the Alabama college/university where the State-approved educator preparation program is being completed or was completed for information on the specific testing requirements which she/he must meet.

Information about the AECAP may also be found on the ALSDE web site [www.alabamaachieves.org](http://www.alabamaachieves.org) (click Teachers & Administrators ⇨ Teacher Center ⇨ Teacher Assessment) or by contacting the Educator Assessment Section of the ALSDE at (334) 694-4594 or [edassessment2@alsde.edu](mailto:edassessment2@alsde.edu).

- **ONLY current AECAP- prescribed assessments are accepted.**
- Only official score reports, submitted with the applicant's complete and correct Social Security number directly from the testing company via electronic submission to the ALSDE, will be accepted. **The applicant's failure to provide his/her complete and correct Social Security number to the testing company will delay the certification process.**
- Education Testing Service (ETS) automatically forwards official Praxis score reports to the ALSDE if the Alabama prescribed test is taken in Alabama and the applicant's complete and correct Social Security number is included. For Alabama prescribed tests taken outside Alabama, the code 7020 must be used to designate the ALSDE as a recipient of official score reports.
- **DO NOT SEND PAPER TEST SCORE REPORTS.**

**EDUCATIONAL EXPERIENCE**

Verification of professional educational work experience is required for issuance of certain advanced level (Class A, Class AA) Professional Educator or Professional Leadership Certificate(s). The experience must be verified on Supplement EXP. The Certification Officer of the recommending college/university can advise the applicant if verification of experience must be submitted to the Educator Certification Section of the ALSDE.

**APPLICATION SUBMISSION and ATTESTATIONS**

I understand the Educator Certification Section is unable to determine eligibility for Alabama certification until all required application components have been received and reviewed. Additional information may be requested upon review of the file. The submission of supporting documents ONLY (e.g., Supplement CIT) does not constitute making application for certification. Incomplete forms will delay the review of the file.

I understand that I must meet all Alabama certification requirements in effect on the date the application is received in the Educator Certification Section. Since certification requirements are subject to change, current requirements may be viewed at [www.alabamaachieves.org](http://www.alabamaachieves.org).

I understand that I must **thoroughly read** all requirements of this approach (Form NAL 02/2022).

I give my permission for the recommending Alabama college/university to forward any credential(s) required to support this certification request.

I understand that it is my responsibility to keep all personal data on file in the Educator Certification Section current.

I understand that it is my responsibility to maintain my certificate and to stay informed of current regulations for renewal.

I certify that all information pertaining to this application form is true and correct and failure to submit accurate information may result in revocation or non-issuance of my certificate.

By affixing my signature to this document, I am certifying that true and correct information is being provided.

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 Date

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 Signature