



APPLICATION FOR KENTUCKY CERTIFICATION OR CHANGE IN SALARY RANK

Read instructions before completing application. Incomplete application will delay processing.

SECTION I. RECORD OF PREPARATION TO BE COMPLETED BY APPLICANT (type or print)

A. PERSONAL INFORMATION

_____ () _____ Social Security Number	_____ E-Mail Address	_____ Telephone Number	
_____ Last Name	_____ First Name	_____ Middle or Maiden Name	
_____ Mailing Address	_____ City	_____ State	_____ Zip Code

Date of Birth (Month/Day/Year) _____ Sex: Male or Female (Please circle one)

ETHNIC IDENTIFICATION -- OPTIONAL (check one)

- | | |
|--|--|
| <input type="checkbox"/> White, Non-Hispanic | <input type="checkbox"/> Black, Non-Hispanic |
| <input type="checkbox"/> Asian or Pacific Islander | <input type="checkbox"/> American Indian |
| <input type="checkbox"/> Hispanic | <input type="checkbox"/> Other |

Are you a veteran of the United States Armed Forces or Reserves with at least six years of service? Yes ___ No ___

Effective January 1, 1997 charges for certification are as follows:	
1. Statement of Eligibility	-0-
2. Limited One-Year Eligibility	-0-
3. Five (5) Year Substitute Certificate	\$15.00
4. Reissuance of Additional Four (4) Year Certificate	\$35.00
5. Issuance or Reissuance of Regular Five (5) Year Certificate	\$50.00
6. Duplicate Certificate (copy)	\$25.00
7. Addition of Area or Rank Change	\$50.00

Make cashier's check or money order payable to:
KENTUCKY STATE TREASURER
FEES MUST ACCOMPANY THE APPLICATION - NO PERSONAL CHECKS ACCEPTED
Applications received without the appropriate fees **will be returned.**
A \$10.00 PROCESSING FEE WILL BE RETAINED FOR CERTIFICATES THAT CANNOT BE ISSUED.

B. TYPE OF CERTIFICATE AND/OR RANK CHANGE REQUESTED - CONSISTENT WITH PROGRAM COMPLETED

C. COLLEGE ATTENDANCE RECORD

COLLEGE/UNIVERSITY	ADDRESS	DATES OF ATTENDANCE				TOTAL SEMESTER HOURS OR DEGREES AWARDED
		FROM M Y	TO M Y			

D. PRAXIS II REQUIREMENTS (See Instructions - Section I.D.)

- (1) Have you had two or more years of acceptable out-of-state teaching experience? Yes ___ No ___ If YES, complete Section II.
(2) Indicate when Praxis II tests were/will be taken: Specialty Test # _____ date _____ Specialty Test # _____ date _____
Indicate when PLT test was/will be taken: Principles of Learning and Teaching # _____ date _____
NOTE: When requesting Educational Testing Service (ETS) to forward your test scores, use code 7283 (Education Professional Standards Board).

SECTION II. RECORD OF EXPERIENCE COMPLETED BY APPLICANT AND VERIFIED BY SCHOOL SUPERINTENDENT

SCHOOL DISTRICT	ADDRESS	POSITION (INCLUDE GRADE LEVEL & SUBJECT)	CHECK ONE		EMPLOYMENT DATES			
			FULL-TIME	OTHER	FROM M Y	TO M Y		

I verify that this applicant has had successful experience as indicated above.

SIGNED _____ LOCAL SCHOOL SUPERINTENDENT NAME OF LOCAL SCHOOL DISTRICT _____ DATE _____
DISTRICT TELEPHONE # (____) _____

GENERAL INSTRUCTIONS

This application form is to be used to apply for any type of Kentucky teaching or administrative certificate, certificate endorsement, additional certification, certificate extension or advance in rank. The requirements for certificate issuance and renewal are outlined in the relevant EPSB statutes and regulations.

Kentucky certification requires completion of an approved program of preparation from a regionally accredited institution. You must request the certification official of the preparing college/university to complete Section IV.

Official transcripts bearing the seal of the institution and the signature of the registrar are required for all coursework not previously submitted. (If transfer credit accepted toward a degree is not listed by course titles and credits, an official transcript of this coursework is also needed.) **A minimum cumulative GPA of 2.50 OR a GPA of 3.0 on the last sixty (60) hours of coursework is required.**

Complete each section of the application according to the directions. Failure to complete the application completely and accurately will delay processing.

APPLICATIONS ARE PROCESSED ON A FIRST-COME, FIRST-SERVED BASIS ACCORDING TO THE DATE THE REQUEST IS RECEIVED. REQUESTS RECEIVED AT OR NEAR THE END OF A SEMESTER WILL TAKE LONGER TO PROCESS. ONLY ORIGINAL SIGNATURES SHOULD BE SUBMITTED. FAXED MATERIALS ARE NOT ACCEPTABLE.

Initial certification for classroom teaching: Out-of-state applicants for a teaching certificate who have completed two (2) years of acceptable full-time or half-time teaching experience at the grade level and content area for which teacher certification is requested, will be exempted from the PRAXIS II, Principles of Learning and Teaching (PLT) tests, and from the Kentucky Teacher Internship Program (KTIP).

If the PRAXIS II and PLT tests were taken within the last five (5) years, a sealed copy of the scores will be accepted or the applicant may request that a copy of the scores be sent to this office from Educational Testing Service (ETS) at their WEB address www.ets.org/praxis or phone 1-609-771-7395. When requesting ETS to forward the test scores, use code 7283 to indicate Education Professional Standards Board. If the college can provide scores in Section IV-E, this information will be used in lieu of the sealed copy of the scores.

Initial certification for school principal requires successful completion of two (2) assessments: (1) the School Leaders Licensure Assessment, and (2) the Kentucky Principal Test. The testing requirements for principalship certification **cannot** be waived for in-state applicants.

Two (2) years of acceptable full-time or half-time out-of-state teaching experience are required to waive the assessments and KTIP for applicants who prepared outside Kentucky. Certain other certificates require experience prerequisites (e.g., three (3) years of teaching for principalship, and supervisor of instruction; three (3) years of teaching and two (2) years of administrative for school superintendent.)

Record all school experience. The applicant should secure verification by the superintendent of the school district where the most recent experience was obtained. If the most recent experience is not sufficient to waive the assessments and/or to satisfy the experience prerequisites, the applicant may attach signed letters of the additional experience from superintendent(s) of the district(s) where the experience was completed.

If you did not complete an approved program of preparation at a regionally accredited college or university, but hold a valid teaching certificate from another state issued through transcript evaluation or an alternative preparation program, submit an official description of the program, a copy of the certificate, and the signature of the certifying agency.

SECTION III. CHARACTER AND FITNESS

(This form must be completed with each certification application and submitted to the Education Professional Standards Board, Division of Certification, 100 Airport Road, 3rd Floor, Frankfort, KY 40601, (502) 564-4606, (888) 598-7667, or www.Kyepsb.net)

Name: _____ Social Security Number: _____

Address: _____
(Street) (City) (State) (Zip Code)

Telephone Number: () _____

Answer each question by circling "yes" or "no." If you answer "yes" to any question, you must submit a full explanation using a separate sheet of paper.

If you have ever held, or currently hold a professional certificate, license, credential, or other document issued to you by any jurisdiction (other than Kentucky) within the United States or abroad, enclose a copy of the certificate(s) or provide the following:

State or Jurisdiction _____ Certificate Number _____

Type _____ Issue Date _____ Expiration Date _____

- | | | | |
|----|--|-----|----|
| 1. | Have you ever had a professional certificate, license, credential, or any document issued to you for practice denied, suspended, revoked, or voluntarily surrendered? | Yes | No |
| 2. | Are you currently being reviewed or investigated for purposes of such action as stated in #1 or is such action pending? | Yes | No |
| 3. | Have you ever been dismissed, resigned, released, or asked to resign/retire or discharged from a professional position or military service for immorality, incompetence, willful neglect of duty, misconduct, or presenting false information toward obtaining the position? | Yes | No |
| 4. | Is any such action as stated in #3 pending? | Yes | No |
| 5. | Have you ever been convicted of a felony or misdemeanor (other than a moving traffic violation), been found guilty, or entered a plea of nolo contendere (no contest), even if adjudication was withheld, in Kentucky or any other state? | Yes | No |
| 6. | If you indicated "yes" to any items, #1 through #6, has that action been reviewed by the Education Professional Standards Board? _____ | Yes | No |

(Date of Review)

I affirm and declare that all information given by me on this form is true, and correct, and complete to the best of my knowledge. I understand that any misrepresentation of facts, by omission or addition, may result in the denial or revocation of my teaching certificate. Further, I understand that KRS 161.120 provides that a teaching certificate may be revoked at any time upon determination that false information was presented toward obtaining a teaching certificate.

I declare that I understand the standard for personal and professional conduct expected of a professional educator in Kentucky. I further certify that I have read and examined the CODE OF ETHICS (page 4) applicable to school personnel, understand its provisions, and agree to abide by its terms during the course of my career as a professional educator.

SIGNATURE _____ DATE _____

**PROFESSIONAL CODE OF ETHICS
FOR
KENTUCKY SCHOOL PERSONNEL
16 KAR 1:020**

Section 1. Certified personnel in the Commonwealth:

- (1) Shall strive toward excellence, recognize the importance of the pursuit of truth, nurture democratic citizenship, and safeguard the freedom to learn and to teach;
- (2) Shall believe in the worth and dignity of each human being and in educational opportunities for all;
- (3) Shall strive to uphold the responsibilities of the education profession.

(A) To Students

- Shall provide students with professional education services in a non-discriminatory manner and in consonance with accepted best practice known to the educator.
- Shall respect the constitutional rights of all students.
- Shall take reasonable measures to protect the health, safety, and emotional well-being of students.
- Shall not use professional relationships or authority with students for personal advantage.
- Shall keep in confidence information about students which has been obtained in the course of professional service, unless disclosure serves professional purposes or is required by law.
- Shall not knowingly make false or malicious statements about students or colleagues.
- Shall refrain from subjecting students to embarrassment or disparagement.
- Shall not engage in any sexually related behavior with a student with or without consent, but shall maintain a professional approach with students. Sexually related behavior shall include such behaviors as sexual jokes; sexual remarks; sexual kidding or teasing; sexual innuendo; pressure for dates or sexual favors; inappropriate physical touching, kissing, or grabbing; rape; threats of physical harm; and sexual assault.

(B) To Parents

- Shall make reasonable effort to communicate to parents information which should be revealed in the interest of the student.
- Shall endeavor to understand community cultures and diverse home environments of students.
- Shall not knowingly distort or misrepresent facts concerning educational issues.
- Shall distinguish between personal views and the views of the employing educational agency.
- Shall not interfere in the exercise of political and citizenship rights and responsibilities of others.
- Shall not use institutional privileges for private gain, for the promotion of political candidates, or for partisan political activities.
- Shall not accept gratuities, gifts or favors that might impair or appear to impair professional judgement, and shall not offer any of these to obtain special advantage.

(C) To the Education Profession

- Shall exemplify behaviors which maintain the dignity and integrity of the profession.
- Shall accord just and equitable treatment to all members of the profession in the exercise of their professional rights and responsibilities.
- Shall keep in confidence information acquired about colleagues in the course of employment, unless disclosure serves professional purposes or is required by law.
- Shall not use coercive means or give special treatment in order to influence professional decisions.
- Shall apply for, accept, offer, or assign a position or responsibility only on the basis of professional preparation and legal qualifications.
- Shall not knowingly falsify or misrepresent records of facts relating to the educator's own qualifications or those of other professionals.

Commonwealth of Kentucky
EDUCATION PROFESSIONAL STANDARDS BOARD
Division of Certification, 100 Airport Road, 3rd Floor
Frankfort, Kentucky 40601
Telephone (502) 564-4606 (888) 598-7667 www.Kyepsb.net

APPLICATION FOR KENTUCKY CERTIFICATION OR CHANGE IN SALARY RANK

Read instructions before completing application. Incomplete application will be returned.

A. PERSONAL INFORMATION

_____	_____	()	
Social Security Number	E-Mail Address	Telephone Number	
_____	_____	_____	
Last Name	First Name	Middle or Maiden Name	
_____	_____	_____	
Mailing Address	City	State	Zip Code

SECTION IV. CERTIFICATE AND/OR RANK CHANGE BEING RECOMMENDED

(TO BE COMPLETED BY THE PREPARING COLLEGE/UNIVERSITY CERTIFICATION OFFICER)

A. TYPE OF CERTIFICATE AND/OR RANK CHANGE REQUESTED _____

B. RECOMMENDATION

PROGRAM COMPLETED (Include grade level and subject(s))

DATE PROGRAM COMPLETED (M/D/Y)

_____	_____
_____	_____
_____	_____
_____	_____

C. STUDENT TEACHING (SEE INSTRUCTIONS, ITEM C)

(1) GRADE LEVEL _____ SUBJECT _____ (2) GRADE LEVEL _____ SUBJECT _____

D. PROGRAM APPROVAL/ACCREDITATION STATUS

Is/are the programs listed above state approved? Yes _____ No _____
Is the institution NCATE accredited? Yes _____ No _____

E. PRAXIS II SCORES/PLT SCORE

* Tests must have been taken within the past five years.

TESTS*	CODE #	SCORE	DATE OF EXAM Month/Day/Year
SPECIALTY TEST			
SPECIALTY TEST			
SPECIALTY TEST			
SPECIALTY TEST			
PLT TEST			

I verify the test scores listed above and recommend a rank change or the issuance of a certificate as indicated above.

_____	_____	_____
COLLEGE/UNIVERSITY	SIGNATURE AND TITLE	DATE
TELEPHONE NUMBER () _____		

NOTE: THE TEST SCORES PROVIDED AS PART OF THIS APPLICATION WILL NOT BE RELEASED IN ANY PERSONALLY IDENTIFI-
ABLE FORM TO ANY OTHER PARTY WITHOUT OBTAINING WRITTEN CONSENT OF THE APPLICANT (FAMILY EDUCATIONAL
RIGHTS AND PRIVACY ACT 1974)

INSTRUCTIONS**SECTION IV: CERTIFICATE AND/OR RANK BEING RECOMMENDED****A., B. KENTUCKY COLLEGE/UNIVERSITY EDUCATOR CERTIFICATION OFFICERS**

Please use the most recent certification codes used by the Division of Certification. Indicate the certificate type and rank corresponding to the approved program completed by the applicant at your institution and the date on which all program requirements were completed.

EDUCATOR CERTIFICATION OFFICERS OUTSIDE KENTUCKY

Indicate approved program(s) completed by the applicant at your institution including the grade levels of the certification. List only programs that have been approved for certification by the appropriate state authority (i.e. state department of education or standards board). Also, indicate the date(s) on which all program requirements were completed.

C. STUDENT TEACHING

Indicate the grade level(s) of the student teaching completed. For middle grade/secondary teachers, also list the subject(s). Please include field experience requirements in lieu of student teaching for alternative preparation programs.

D. PROGRAM APPROVAL/ACCREDITATION STATUS

Please indicate whether each program for which recommendation is being made is approved by the certification authority in your state for certification purposes. Also, indicate whether your institution is accredited by the National Council for Accreditation of Teacher Education. This information is essential for processing out-of-state applications.

E. PRAXIS II/PLT REQUIREMENTS

NOTE: Applicants for a **teaching certificate** who have completed two (2) years of acceptable full-time or half-time out-of-state teaching experience at the grade level and content area for which certification is requested will be exempt from the PRAXIS II & PLT tests and from KTIP.

Initial certification for school principal requires successful completion of the two (2) assessments: (1) the School Leaders Licensure Assessment, and (2) the Kentucky Principal Test.

The testing requirements for initial principalship certification **cannot** be waived.

Scores on tests completed five (5) or more years prior to application **will not** be accepted.

**RETURN THE COMPLETED APPLICATION AND OFFICIAL TRANSCRIPTS
TO THE FOLLOWING ADDRESS:**

Education Professional Standards Board
Division of Certification
100 Airport Road, 3rd Floor
Frankfort, KY 40601

RANK (for salary purposes)

Rank I	30 semester hours of approved graduate credit in addition to Rank II; 60 semester hours of approved graduate credit including a master's degree; National Board for Professional Teaching Standards Certification; or the Kentucky Continuing Education Option.
Rank II	Master's degree to: enhance the professional competency of the initial teaching certification; add a certification area not covered by the initial certificate; or advance professionally to a higher position. A 32 semester-hour non-degree Education Planned Fifth-Year Program (graduate level); or the Kentucky Continuing Education Option.
Rank III	Bachelor's Degree leading to a provisional teaching certificate