

BALDWIN COUNTY BOARD OF EDUCATION

Alternative Certification – Basic Eligibility Questionnaire

If you do not hold an Alabama teaching certificate in the teaching field or area of instructional support for which you are seeking employment, and you wish to pursue alternative certification, please complete this form.

Name: _____

SSN (Last 4 digits): _____ Email: _____

1. Are you **currently** enrolled in a teacher education program in Alabama or any other state? Yes No
 If no, within the next three years, do you anticipate enrollment in a teacher education program? Yes No
 If you answered yes to either question, complete the following:

College/University: _____ City and State: _____

Program: _____ Degree Level: _____

Date of enrollment (mm/yyyy): _____ Anticipated date of completion (mm/yyyy): _____

2. Have you earned credit for any professional education courses, but did not complete a traditional P-12 educator preparation program leading to certification? Yes No If yes, please complete the following:

College/University	City and State	Dates Attended	Number of Education Courses Completed

3. List all degrees and the GPA at the time each degree was conferred.

Degree (bachelor's, master's, etc.)	Date (mm/yyyy)	College/University	GPA on a 4.0 scale

Certificated employees will be paid at the level of their highest earned degree from a regionally accredited institution upon proper documentation of that degree (i.e. an **official** transcript showing the date of conferral) and verification of that degree by the Alabama State Department of Education. It should be noted that State Department reviews for higher degree are only performed for individuals with current valid Alabama certification.

Certificated employees pursuing alternative certification are only eligible for Bachelor level pay until an Alabama teaching certificate is issued and verification of the higher degree is obtained.

4. Do you currently hold any type of valid licensure (RN, Speech Pathology, Cosmetology Instructor, etc.)? Yes No
 If yes, complete the following:

Type of License: _____ Issuing State: _____ Date of Expiration: _____

By signing below, I certify that all information listed above is true and correct to the best of my knowledge.

Signature: _____ Date: _____

If you are a current full-time employee of the Baldwin County Board of Education, submit this form to the Human Resources Office.
 If you are applying for employment, attach a copy of this form to your online employment application on Teach in Alabama.