APPLICATION TO
CONVERT A PROVISIONAL TO A STANDARD
CAREER AND TECHNICAL EDUCATION (CTE) CERTIFICATE

ARIZONA DEPARTMENT OF EDUCATION - CERTIFICATION UNIT
Phoenix Office: P.O. Box 6490, Phoenix, AZ 85005-6490 Telephone: (602) 542-4367
Flagstaff Office: 2384 N. Steves Blvd., Box-C, Flagstaff, AZ 86004 Telephone: (928) 679-8117
Tucson Office: 400 W. Congress St., #118, Tucson, AZ 85701 Telephone: (520) 628-6326

GENERAL INSTRUCTIONS AND INFORMATION - Please submit the following:

A. One of the following:
   1. A photocopy of your valid Arizona **IVP** fingerprint card (plastic) issued on or after January 1, 2008; **OR**
   2. A photocopy of your valid Arizona fingerprint clearance card (plastic) **issued prior to January 1, 2008**.

B. Completed application and a money order, cashier's check or personal check **ONLY** for the amount due, made payable to the Arizona Department of Education (**ADE**). Fees are **not** refundable. **Cash will not be accepted.**

C. An official transcript(s) of academic coursework completed from an accredited institution; photocopies will not be accepted.

D. Verification of a passing score on the AEPA Professional Knowledge – Secondary (#92) assessment or comparable out-of-state exam.

E. Verification of State approved CTE professional development hours (if applicable).

F. Letter verifying 2 years of full-time teaching experience exhibiting satisfactory performance in the classroom.

G. Verification of 3 semester hours or 45 clock hours of State approved Structured English Immersion (SEI) training to qualify for the Full SEI Endorsement (if applicable).

H. Verification of Arizona and/or U.S. Constitution (if applicable).

PERSONAL INFORMATION (TYPE OR PRINT IN BLUE OR BLACK INK)

Social Security Number: _____-_____-_____ **Date of Birth:** _____/_____/_____ **Gender:** M / F
(For identification purposes only)

Full Legal Name: _____
Last First Middle

Mailing Address: _____
Street Number or P.O. Box City State Zip

Telephone: (_____) _____-_____ **Email Address:** _____
(Home) (Home)

Ethnicity: ____Asian or Pacific Islander ____Black or African-American (Not-Hispanic) ____Hispanic or Latino
____White (Not-Hispanic) ____American Indian or Alaskan Native ____Other
(Gender and Ethnicity are requested for federal reporting purposes only)

I would like to **CONVERT** the following 3-year Provisional certificate(s) to a 6-year Standard certificate(s):

Certificates:

__**Agriculture** ($60)

__**Business & Marketing** ($60)

__**Family & Consumer Sciences** ($60)

__**Health Careers** ($60)

__**Industrial and Emerging Technologies** ($60)

__**Education & Training** ($60)

Endorsement (if applicable):

__**Full Structured English Immersion (SEI)** ($60)

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CRIMINAL HISTORY - ANSWER EVERY QUESTION, SIGN AND DATE

ATTN: If "YES" is indicated for any of the following questions, please attach a full explanation to this application, a statement must be provided with each application.

1. YES___ NO___ Have you ever had any professional certificate or license, revoked or suspended?
2. YES___ NO___ Have you ever received a reprimand or other disciplinary action involving any professional certification or license?
3. YES___ NO___ Have you ever been convicted of any felony offense?
4. YES___ NO___ **Have you ever been arrested for any offense for which you were fingerprinted?**
5. **HAVE YOU EVER BEEN ARRESTED FOR ANY OF THE FOLLOWING OFFENSES IN THIS STATE OR SIMILAR OFFENSES IN ANOTHER JURISDICTION?**

YES___ NO___ **a** Second-degree murder
YES___ NO___ **b** Aggravated assault resulting in serious physical injury or involving the discharge, use or threatening exhibition of a deadly weapon or dangerous instrument against a minor under fifteen years of age
YES___ NO___ **c** Sexual assault
YES___ NO___ **d** Molestation of a child
YES___ NO___ **e** Sexual conduct with a minor
YES___ NO___ **f** Commercial sexual exploitation of a minor
YES___ NO___ **g** Sexual exploitation of a minor
YES___ NO___ **h** Child abuse
YES___ NO___ **i** Kidnapping
YES___ NO___ **j** Sexual abuse of a minor
YES___ NO___ **k** Taking a child for the purpose of prostitution as prescribed in section 13-3206
YES___ NO___ **l** Child prostitution as prescribed in section 13-3212
YES___ NO___ **m** Involving or using minors in drug offenses
YES___ NO___ **n** Continuous sexual abuse of a child
YES___ NO___ **o** Attempted first-degree murder
YES___ NO___ **p** Any other dangerous crime against children as defined in section 13-604.01
YES___ NO___ **q** Any of the above listed offenses if committed as a reparatory offense as described in section 13-1001
YES___ NO___ **r** Any offense causing you to register as a sex offender
YES___ NO___ **s** First-degree murder
YES___ NO___ **t** Armed Robbery
YES___ NO___ **u** Incest
YES___ NO___ **v** Exploitation of minors involving drug offenses
YES___ NO___ **w** Sexual abuse of a vulnerable adult
YES___ NO___ **x** Sexual exploitation of a vulnerable adult
YES___ NO___ **y** Commercial sexual exploitation of a vulnerable adult
YES___ NO___ **z** Abuse of a vulnerable adult
YES___ NO___ **aa** Molestation of a vulnerable adult
YES___ NO___ **bb** Neglect of a vulnerable adult

I understand that pursuant to ARS § 15-534, any person who makes a false statement, representation or certification in any application for certification is guilty of a misdemeanor offense. I swear or affirm that the foregoing information completed by me, or submitted by me for certification purposes is, to the best of my knowledge, true and correct. Furthermore, should any part or all of the information herein provided prove to be false, I recognize that it shall be just cause for revocation, suspension, or other disciplinary action against any certificate issued to me by the Arizona Department of Education.

_____ _____
Date Applicant's Signature

*PURSUANT TO A.R.S. 15-534.03, EACH EDUCATOR MUST NOTIFY THE DEPARTMENT OF EDUCATION OF ANY CHANGE OF ADDRESS WITHIN THIRTY DAYS. CHANGE OF ADDRESS FORMS ARE AVAILABLE ON OUR WEBSITE. ALL DOCUMENTATION, INCLUDING TRANSCRIPTS, BECOMES THE PROPERTY OF THE ARIZONA DEPARTMENT OF EDUCATION AND WILL NOT BE RETURNED. REQUIREMENTS MAY BE SUBJECT TO CHANGE AND ARE FULLY REFERENCED IN THE ARIZONA REVISED STATUTES AND ADMINISTRATIVE CODE.