 District Request and Assurance for

Emergency Certification

Teacher Certification –Alaska Department of Education and Early Development

# APPLICANT INFORMATION

Last Name:       First Name:       M.I.:

Last Four of Social Security Number:      Date of Birth:       Gender:

* **The remaining sections below are to be completed by the school district designee, NOT the applicant.**

# DISTRICT INFORMATION

Alaska School District or Educational Organization:

District Office Address:       City:      State:    Zip Code:

District Phone Number:       District Fax Number:

Superintendent or Chief School Administrator Email Address:

# PLACEMENT

Indicate the applicant’s placement within the district or educational agency. Individuals holding an Emergency certificate may not be placed in a Special Education position.

**Location/Position Content Area Grade Level(s)**

           

# EMERGENCY DETAILS

Districts must describe the nature of the emergency, the efforts to fill the position with a fully certified educator, and the impact of leaving the position vacant. Include the duration and methods used for the position’s recruitment.

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# ASSIGNED MENTOR

Districts must provide a certified, experience mentor for individuals holding a temporary emergency certificate. Indicate the name of the mentor assigned to this applicant.

**Name Current Certificate Type Years of Experience**

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# REQUEST & ASSURANCE

I request the issuance of an Emergency Certificate for the individual listed in the APPLICANT INFORMATION section above. I certify that the district or educational agency intends to hire the applicant in a certified position.

The district or educational agency is aware that the applicant is not able to meet the all the requirements of certification and is requesting one or more requirements to be waived. The Emergency Certificate issued will only be valid at the school district or educational agency sponsoring the applicant.

Superintendent or Agency Director Printed Name:

Superintendent or Agency Director Signature: Date:

# CONTACT TEACHER CERTIFICATION

If you have questions, please use the following information to contact the Teacher Education & Certification Office:

Email: [Teacher Certification](mailto:tcwebmail@alaska.gov) (tcwebmail@alaska.gov)  
Phone: (907) 465-2831 Fax: (907) 465-2441  
[Teacher Certification Website](https://education.alaska.gov/teachercertification) (education.alaska.gov/teachercertification)