



# LIMITED TYPE M CERTIFICATION

## Applicant Instructions

---

### PERSONAL INFORMATION

Enter all personal information in the spaces provided, including contact phone number(s) and email address.

It is the responsibility of the applicant to maintain current information, including name and mailing address, on file with the Teacher Certification office.

*The district address entered on the District Request or Recommendation form will be the address that the Type M certificate will be mailed.*

---

### BACKGROUND INFORMATION

Answer "yes" or "no" to questions one through six (1-6) as they apply to you. If the answer to any of these questions is "yes," please provide a written, detailed explanation of the incident and sign it. It is not necessary to provide a written explanation of a minor traffic violation. Include a written explanation of incidences involving Driving While Intoxicated (DWI) or Driving Under the Influence (DUI).

**If no written explanation is provided for any "yes" answers to questions one through six (1-6), the application will be returned.**

If you answer "yes" to question seven (7), list the state(s) where you hold/held teaching certificates and the expiration date(s).

---

### ETHNICITY

Check the box that most appropriately applies to you. Definitions for each choice are provided.

---

### REQUESTED ENDORSEMENTS

Endorsements will only be granted if they have been **requested** in this section of the application. Select all endorsement area that you are requesting to be on your Type M certificate.

Requesting an endorsement does not guarantee that the endorsement area will be granted. Endorsements will only be granted based on endorsements requested by the school district and evidence provided by your record of training and work experience.

---

### RECORD OF TRAINING

List all colleges/universities you attended. You must include all college coursework, including community college or transfer credits.

Official transcripts for all institutions listed in this section must be included with the application. Do **not** request universities to submit transcripts directly to the Teacher Certification office. *We encourage you to open the sealed transcripts when they arrive to verify the correct coursework and/or degree(s) are posted. We accept official transcripts after they have been opened*, provided the transcripts bear the registrar's signature/seal and are printed on official university transcript paper. Unofficial transcripts, electronic transcripts, or photocopies will not be accepted.

List all training and certificates of completion that you have received related to the endorsements your district is requesting on your behalf. You must include copies of all certificates of completion with your application.

---

### WORK EXPERIENCE

List all work experiences in the areas for which you are seeking endorsements on your Type M certificate. Provide contact information for your employers on your enclosed resume.

---

### FINGERPRINT CARD CHECKLISTS

One (1) complete fingerprint card is a requirement for all applicants for Initial certification. If you need a fingerprint card, email the Teacher Certification office at [tcwebmail@alaska.gov](mailto:tcwebmail@alaska.gov) and request that a card be sent to you. You must have your fingerprints rolled by a trained technician. The technician must sign and date the card in the appropriate space. All personal information must be filled in, including signature, residence, citizenship, sex, height, weight, race, eye color, hair color, date of birth, and place of birth.

If you have submitted a fingerprint card for a background check to the Teacher Certification office in the previous six months, email the Teacher Certification office at [tcwebmail@alaska.gov](mailto:tcwebmail@alaska.gov) to determine if your previous background check can be used for this application.



# LIMITED TYPE M CERTIFICATION

## Applicant Instructions

---

### REQUIREMENT CHECKLIST

You must have **satisfied** all the requirements listed in this section in order to qualify for a Limited Type M certification. If you do not submit all of the requirements listed in this section in your application packet, the application will be returned. If you have questions about the requirements, please email the Teacher Certification office at [tcwebmail@alaska.gov](mailto:tcwebmail@alaska.gov).

---

### FEE SCHEDULE

The application fee for the Limited Type M certificate is \$125.00. The fingerprint processing fee is an additional \$60.00. All applicants for the Initial certificate must include payment in the form of a cashier's check, money order, credit card or debit card. **Fees are non-refundable. No personal checks will be accepted.**

If paying by credit or debit card, complete all information in this section, including the name on the card and the cardholder's signature.

Cashier's checks or money orders can be made payable to the Alaska Department of Education & Early Development (EED).

---

### IMPORTANT NOTES

Read the important notes that are associated with the type of Limited Type M certificate for which you are applying. When you sign the notarization section, you will attest that you understand the requirements that still need to be met to maintain your Type M certificate and to qualify for renewal.

---

### NOTARIZATION

The application **must** be signed and dated by the applicant in the presence of a Notary Public or Postmaster.

The application must be notarized by a certified Notary Public. If a Notary Public is not available to you, a Postmaster may sign, date, and stamp this affidavit.

**If any portion of this section is incomplete, the application will be returned.**

---

### SUBMIT YOUR APPLICATION

A Limited Type M Certificate can only be issued at the request of an Alaska public school district. When the application and supporting documents are complete, they must be submitted directly to the district office of the sponsoring Alaska public school district.

The issued certificate will be mailed to the school district office address provided on the District Request and Recommendation Forms.

If the applicant would like any original documents (i.e. certificates, original recommendations, etc.) returned, the applicant must include a self-addressed, stamped envelope with the application packet.

# LIMITED TYPE M CERTIFICATION Application



## PERSONAL INFORMATION

LAST NAME	FIRST NAME	M.I.	SOCIAL SECURITY NUMBER
MAILING ADDRESS		CITY	STATE
HOME PHONE NUMBER	WORK OR MOBILE PHONE NUMBER	GENDER	
HOME EMAIL ADDRESS			
BIRTHDATE (MM-DD-YYYY)	FORMER LAST NAME(S)	HIGHEST EDUCATIONAL DEGREE	

**It is the responsibility of the applicant to maintain current information, including name and mailing address, on file with the Teacher Certification office. All name changes must be supported with a photocopy of the legal document verifying the change.**

## BACKGROUND INFORMATION

Answer the following questions carefully and completely. If you answer "yes" to any of the questions 1-6, provide a detailed statement in the box below or on a separate sheet of paper. **Any falsification or deliberate misrepresentation, including omission of a material fact, in completion of this application can be grounds for denial of certification.**

- YES  NO    1. Have you been convicted for a violation of criminal law, except for minor traffic violations? Please include convictions for Driving While Intoxicated (DWI) and Driving Under the Influence (DUI).
- YES  NO    2. Do you currently have any outstanding criminal charges or warrants of arrest pending against you? This would include any state, province, territory, and/or country.
- YES  NO    3. Is there action pending to revoke or suspend a certificate or license issued to you by another jurisdiction? If "yes," on a separate sheet of paper, list the agency, including complete address and telephone number as well as the purpose of the investigation or inquiry.
- YES  NO    4. Have you ever had any adverse action taken on any certificate or license? (Adverse action includes letters of warning, reprimands, suspensions, revocations, voluntarily surrenders, or voidance)
- YES  NO    5. Are you currently or have you ever been the subject of any certificate or licensing investigation or inquiry by any certification or licensing agency for allegations of misconduct? If "yes," on a separate sheet of paper, list the agency, including complete address and telephone number as well as the purpose of the investigation or inquiry.
- YES  NO    6. Have you ever been denied certification? This would include any state, province, territory, and/or country.

**If you answered "yes" to any of the questions above (1-6), provide a detailed statement here. If you need additional space, provide the detailed statement on a separate sheet of paper and sign it.**

**LIMITED TYPE M CERTIFICATION**  
Application



---

YES  NO 7. Have you ever held a teaching certificate in Alaska or another state? If yes, please complete the following.

STATE \_\_\_\_\_ EXPIRES: \_\_\_\_\_ STATE \_\_\_\_\_ EXPIRES \_\_\_\_\_

YES  NO 8. Are you currently under contract or have been offered a contract with a public school district in Alaska? If yes, please complete the following.

Alaska public school district: \_\_\_\_\_, beginning contract date: \_\_\_\_\_

---

# LIMITED TYPE M CERTIFICATION Application



## ETHNICITY

- ALASKA NATIVE
- ASIAN OR PACIFIC ISLANDER
- AFRICAN AMERICAN
- HISPANIC
- CAUCASIAN
- AMERICAN INDIAN/NATIVE AMERICAN
- OTHER

**ALASKA NATIVE:** Any person having origins in any of the original peoples of Alaska, and who maintains cultural identification through tribal affiliation or community recognition. This may include, for example, any person of Yup'ik, Inupiat, Aleut, Athabaskan, Tlingit, Haida, or Tsimshian origin.

**ASIAN OR PACIFIC ISLANDER:** Any person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This includes, for example, China, Japan, Korea, the Philippine Islands and Samoa.

**AFRICAN AMERICAN:** (Not of Hispanic origin); any person having origins in any of the Black racial groups of Africa.

**HISPANIC:** Any person of Mexican, Puerto Rican, Cuban, Central American, or other Spanish culture or origin, regardless of race

**CAUCASIAN:** (Not of Hispanic origin); any person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

**AMERICAN INDIAN/NATIVE AMERICAN:** Any person having origins in any of the original peoples of North America (not including Alaska), and who maintains cultural identification through tribal affiliation or community recognition.

## REQUESTED ENDORSEMENT

Check the box(es) below, to indicate the area(s) that you have either an industry certification or four years of full-time documented work experience.

ALASKA NATIVE LANGUAGE OR CULTURE

- |  |   |
|--|---|
| <input type="checkbox"/> ALEUT LANGUAGE/CULTURE      | <input type="checkbox"/> INUPIAQ LANGUAGE/CULTURE |
| <input type="checkbox"/> ATHABASCAN LANGUAGE/CULTURE | <input type="checkbox"/> TLINGIT LANGUAGE/CULTURE |
| <input type="checkbox"/> HAIDA LANGUAGE/CULTURE      | <input type="checkbox"/> YUPIK LANGUAGE/CULTURE   |

MILITARY SCIENCE

- JROTC
- MILITARY SCIENCE

## RECORD OF TRAINING

List all of the schools you have attended and the trainings you have completed. All [official transcripts](#) and copies of Certificates of Completion must be included with the application. **Unofficial, photocopied, electronic or faxed transcripts will not be accepted.** If you need additional space, provide the information on a separate sheet.

SCHOOL, COLLEGE OR UNIVERSITY	CITY, STATE	MAJOR/PROGRAM	DEGREE(S)/ CERTIFICATE(S) EARNED	YEARS ATTENDED

**Department of Education & Early Development, Teacher Education and Certification**

801 West 10th Street, Suite 200, PO Box 110500 Juneau, AK 99811-0500

Phone: (907) 465-2831 Fax: (907) 465-2441

tcwebmail@alaska.gov

# LIMITED TYPE M CERTIFICATION Application



## WORK EXPERIENCE

List the work experience relevant to areas you selected in the "Endorsement" section. If you need additional space, provide the information on a separate sheet.

EMPLOYER	POSITION OR JOB TITLE	DATES OF EMPLOYMENT	TOTAL YEARS OF EXPERIENCE

## FINGERPRINT CARD CHECKLIST

If you are required to submit one (1) fingerprint card, Form FD-258 or similar, with your application, please use the following checklist to make sure that all the required information on the fingerprint card has been completed. If any section of the fingerprint card is incomplete, the entire application packet will be returned. If you cannot obtain a fingerprint card locally, email the Teacher Certification office at [tcwebmail@alaska.gov](mailto:tcwebmail@alaska.gov) to request a card be sent to you. More information can be found at <http://www.eed.state.ak.us/TeacherCertification/fingerprints.html>.

- Fingerprints must be rolled by a trained technician.
- The technician must sign and date the card in the appropriate space
- All personal information below must be filled in:
 

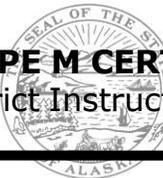
<input type="checkbox"/> signature	<input type="checkbox"/> height	<input type="checkbox"/> hair color
<input type="checkbox"/> residence	<input type="checkbox"/> weight	<input type="checkbox"/> date of birth
<input type="checkbox"/> citizenship	<input type="checkbox"/> race	<input type="checkbox"/> place of birth
<input type="checkbox"/> gender	<input type="checkbox"/> eye color	<input type="checkbox"/> social security number

## REQUIREMENT CHECKLIST

All requirements listed below must be satisfied in order to qualify for **Initial Limited Type M** certification. You must include all of the following items in a single application packet. If any item is missing, the entire application packet will be returned. Please confirm with each checkbox, that each item is included.

- Completed Initial Limited Type M certification application**  
All sections of the application must be complete. If any section is incomplete, the application packet will be returned.
- Official Transcripts & Certificates of Completion**  
Official transcripts or certificates of completion of all training listed in the 'RECORD OF TRAINING' section must be included with the application. OFFICIAL TRANSCRIPTS MAY BE OPENED, BUT NOT MARKED ON IN ANY WAY.
- Fingerprint Card**  
1 FBI Applicant fingerprint card (Form FD-258) is required for Limited Type M applications. If you cannot obtain the fingerprint card locally, email Teacher Certification at [tcwebmail@alaska.gov](mailto:tcwebmail@alaska.gov) to request a card be sent to you. If any section of the fingerprint card is incomplete, the entire application packet will be returned.
- Two Original Letters of Recommendation**  
Each letter must verify length of experience and competency in the specialty field(s). The original letters must be submitted; photocopies will not be accepted. Each letter must include contact information for the author.





# LIMITED TYPE M CERTIFICATION

## District Instructions

---

### **DISTRICT REQUEST FORM**

A Limited Type M Certificate can only be issued at the request of an Alaska public school district. The issued certificate will be mailed to the school district office address provided on the District Request form.

- 1) Have the applicant complete the application form and gather all of the documents listed in the 'REQUIREMENT CHECKLIST' section of the application.
- 2) Complete the District Request form.
- 3) Submit the completed application, the supporting documentation, fees and the District Request form to:

**Department of Education & Early Development**  
**Teacher Education & Certification**  
801 West 10th Street, Suite 200  
PO Box 110500  
Juneau, AK 99811-0500

