

# LIMITED (TYPE M) CERTIFICATION RENEWAL APPLICATION



## PERSONAL INFORMATION

LAST NAME	FIRST NAME	MIDDLE INITIAL	U.S. SOCIAL SECURITY NUMBER
MAILING ADDRESS		CITY	STATE ZIP CODE
HOME PHONE NUMBER	WORK PHONE NUMBER	GENDER	
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.**

## CERTIFICATION AND BACKGROUND INFORMATION

COMPLETE THE FOLLOWING QUESTIONS CAREFULLY AND COMPLETELY BEFORE PROVIDING INFORMATION. **ANY FALSIFICATION OR DELIBERATE MISREPRESENTATION, INCLUDING OMISSION OF A MATERIAL FACT, IN COMPLETION OF THIS APPLICATION CAN BE GROUNDS FOR DENIAL OF CERTIFICATION.**

1. Have you been convicted for a violation of criminal law, except for minor traffic violations? Please include DWIs.  
 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 avoidance)  
 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.  
 YES  NO

**IF YOU ANSWERED 'YES' TO ANY OF THE QUESTIONS ABOVE (1-6), PROVIDE A DETAILED STATEMENT ON A SEPARATE SHEET AND SIGN THE STATEMENT.**

7. Have you ever held a teaching certificate in another state?  YES  NO

STATE	EXPIRATION DATE	STATE	EXPIRATION DATE
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8. Are you currently under contract with a public school district in Alaska?  YES  NO

If yes, school district: \_\_\_\_\_, beginning contract date: \_\_\_\_\_

**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

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## 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, Athabascan, 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.

## RECORD OF WORK EXPERIENCE

LIST ALL RELEVANT WORK EXPERIENCE DURING THE LIFE OF THE CERTIFICATE YOU ARE RENEWING.

POSITION HELD	EMPLOYER/SCHOOL DISTRICT	DATES OF EMPLOYMENT

## RECORD OF TRAINING

OFFICIAL TRANSCRIPTS OR CERTIFICATES FOR ALL TRAINING LISTED BELOW MUST BE INCLUDED WITH THIS APPLICATION. LIST COLLEGES/UNIVERSITIES/SCHOOLS ATTENDED DURING THE LIFE OF THE TYPE M CERTIFICATE YOU ARE RENEWING. *OFFICIAL TRANSCRIPTS MAY BE OPENED, BUT NOT MARKED ON IN ANY WAY.*

COLLEGE/UNIVERSITY/SCHOOL	CITY, STATE	# CREDITS EARNED	SEMESTERS ATTENDED

## FEE SCHEDULE

THE TOTAL FEE FOR RENEWAL IS \$125.00. YOU MAY PAY WITH A CASHIER'S CHECK (PAYABLE TO EED), MONEY ORDER, OR CREDIT CARD (VISA OR MASTERCARD). FEES ARE NON-REFUNDABLE. **DEBIT CARDS OF ANY KIND WILL NOT BE ACCEPTED. PERSONAL CHECKS WILL NOT BE ACCEPTED.**

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AMOUNT

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CREDIT CARD NUMBER

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EXPIRATION DATE (MM/YY)

NAME ON CREDIT CARD \_\_\_\_\_

CARDHOLDER'S SIGNATURE \_\_\_\_\_

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## REQUIREMENTS

ALL REQUIREMENTS LISTED BELOW MUST BE **COMPLETED** IN ORDER TO QUALIFY FOR **TYPE M** CERTIFICATION.

**CURRENT EMPLOYMENT**

In order to renew a Type M Limited certificate, the applicant must be employed as a certified teacher in the same Alaska public school district that requested the initial Type M Limited certificate. A photocopy of the contract must be included with the application.

**DISTRICT RENEWAL REQUEST FORM**

The superintendent or chief school administrator must complete the District Request Form, officially requesting renewal. The completed, ORIGINAL District Request form must be included with this application.

**COURSEWORK/TRAINING**

Three semester hours of academic credit earned from a regionally accredited university. *OFFICIAL TRANSCRIPTS ONLY.*

-OR-

Training or work experience beyond the certified employment with the school district are required to renew a Type M certificate.

## NOTARIZATION

STATE OF \_\_\_\_\_ DATE \_\_\_\_\_  
(MONTH/DAY/YEAR)

\_\_\_\_\_ APPEARED BEFORE ME WHOSE  
(NAME OF APPLICANT)

IDENTIFICATION I HAVE VERIFIED ON THE BASIS OF \_\_\_\_\_  
(TYPE OF PHOTO ID)

TO BE THE SIGNER OF THIS APPLICATION AND HE/SHE  
ACKNOWLEDGED THAT HE/SHE SIGNED IT.

\_\_\_\_\_  
(SIGNATURE OF NOTARY)

MY COMMISSION EXPIRES: \_\_\_\_\_

**IF A NOTARY IS NOT AVAILABLE, A POSTMASTER MAY  
WITNESS, DATE STAMP AND SIGN THIS AFFIDAVIT.**

I CERTIFY UNDER PENALTY OF PERJURY THAT THE  
STATEMENTS MADE BY ME IN THIS APPLICATION ARE TRUE  
AND CORRECT TO THE BEST OF MY KNOWLEDGE. FURTHER, I  
ACKNOWLEDGE THAT I HAVE READ AND WILL ADHERE TO  
THE **STATE OF ALASKA CODE OF ETHICS OF THE  
EDUCATION PROFESSION**. THIS BECOMES PART OF MY  
OFFICIAL RECORD.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

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## LIMITED TYPE M CERTIFICATION RENEWAL APPLICATION

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### CHECKLIST

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, UNPROCESSED. PLEASE CONFIRM WITH EACH CHECKBOX, THAT EACH ITEM IS INCLUDED.

- COMPLETED LIMITED TYPE M CERTIFICATION RENEWAL APPLICATION  
All sections of the application must be complete. If any section is incomplete, the entire application will be returned.
- SIGNATURE AND NOTARIZATION  
The 'NOTARIZATION' section of the application must be completed by all applicants.  
A Notary Public or a Postmaster must witness and verify your signature.
- DISTRICT RENEWAL REQUEST FORM  
The superintendent or chief school administrator must complete the District Request Form, officially requesting renewal.  
The completed, ORIGINAL District Request form must be included with this application.
- COPY OF CURRENT CONTRACT  
A photocopy of the contract showing current certified employment in an Alaska Public School district must be included.
- APPLICATION FEES  
The application fee for renewal of a Type M certificate is \$125. Please refer to the 'FEE SCHEDULE' section of the application.  
Fees are non-refundable.  
YOU MAY PAY WITH A CASHIER'S CHECK, MONEY ORDER, OR CREDIT CARD (VISA OR MASTERCARD).  
PERSONAL CHECKS WILL NOT BE ACCEPTED.
- OFFICIAL TRANSCRIPTS/CERTIFICATES  
Three semester hours of academic credit OR training or work experience beyond the certified employment with the school district are required to renew a Type M certificate.  
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.*

