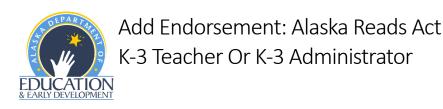


Teacher Certification – Alaska Department of Education and Early Development

PERSONAL INFORMATION

It is the responsibility of the application of the			-			
Last Name:	F	First Name:		M.I.:		
Social Security Number:		Date of Birth:	(Gender:		
Mailing Address:	City:	State:	Zip Code:	Country:		
Home Phone:		Work/Cell Phone:				
Primary Email:		Secondary Email:				
Former Last Name(s):		Highest Educationa	Degree:			
ENDORSEMENT(S) RE I am requesting the following end		d to my certificate(s):				
☐ ☐ Alaska Reads Act K-3☐ ☐ Alaska Reads Act K-3☐						
AK READS ACT ENDO	RSEMENT REC	QUIREMENT				
To qualify for an Alaska Reads	Act endorsement, y	ou must satisfy one o	f the following op	tions:		
Option 1: Completion of a This method requires the compapproved trainings and course Professional-Development)	oletion of a DEED-ap	oproved Science of Re	ading (SoR) trainii	_		
Indicate below which of the ap transcript or a copy of your cer		•	•			
DEED-approved SoR training of	or coursework		Date of (Completion		
Option 2: Passing Score or This method requires passing s (https://education.alaska.gov/	cores on one of the	approved SoR exams	• •			
Content Area Exam (Vendor N	ame & Exam #)		Date of (Completion		
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FEE SCHEDULE

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CHECKLIST	
 □ Completed Endorsement Application □ Science of Reading Exam Score Report, Official Transcripts, or Certificate 	
SIGNATURE	
certify that the information provided in this application is true and correct to the best of my knowledge. Applicant Signature:	
Date:	
Notes: If you would like your original documents returned, you must include a self-addressed, stamped envelope with your	

complete packet. We recommend that you send your completed packets to the Teacher Education & Certification Office using one of the many tracking options that are available.

MAIL YOUR APPLICATION

The application and supporting documents must be mailed to the Teacher Certification office at the following address:

Department of Education and Early Development **Teacher Certification** PO Box 110500 Juneau, AK 99811-0500

QUESTIONS

Email: <u>Teacher Certification</u> (tcwebmail@alaska.gov)

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

Teacher Certification Website (https:/education.alaska.gov/teachercertification)