

APPLICATION PACKET FOR

# Alternative Authorizations



IDAHO DEPARTMENT OF EDUCATION  
CERTIFICATION AND PROFESSIONAL STANDARDS

650 W STATE STREET, 2ND FLOOR  
BOISE, IDAHO 83702  
208 332 6800 OFFICE / 711 TRS  
[WWW.SDE.IDAHO.GOV](http://WWW.SDE.IDAHO.GOV)

CREATED 5/1/2025

## INSTRUCTIONS FOR FILLING OUT APPLICATION

Each application type will be color coordinated.

### *\*Districts/Charters –*

Identify which application is to be used and the appropriate assignment and endorsement. Acquire all signatures acquired, e.g. Board Chairperson, Superintendent or Charter Administrator, educator's signatures and including applicable documents.

### *\*Candidate –*

Responsible for completing the Candidate Sections, including selection of application type, the route towards obtaining the certificate/endorsement, providing the school with applicable documents and signatures/initialing the legal/licensing history section.

District/Charter Section
Section I – School Information
Section II – Educator Information
Section III – Select Application Type <b><i>*Only provide the applicable application to the candidate/educator* (Sections IA, IB, or IC)</i></b>
Section IV – Requested Endorsement and Assignment
Section V – Content Specialist Content Qualifier
Section VI – Name of Mentor for Content Specialist or Teacher to New Endorsement, Option II or III
Section VII – School Attestations
Candidate Section
Section I – Application Type and Route Selection <b><i>*Select Content Specialist IA, Pupil Service Staff IB or Teacher to New IC</i></b>
Section II – Licensing History
Section III – Legal History
Section IV – Attestations and Signatures - initial and date

### APPLICATION FEE – \$100

- Check or money order made payable to the Idaho Department of Education or SDE and is included with the application.  
(Credit cards are not accepted. Payment is non-refundable. One (1) check or money order for both application and BIC fees is acceptable. Mailing cash is not recommended)

### BACKGROUND INVESTIGATION CHECK (BIC)

- Completed and signed Idaho fingerprint card
  - Information is available on the following [Background Investigation Check website](#)
- Associated fingerprint forms
- Background check fee – \$28.25
  - A new fingerprint packet is required if the candidate is new to the district/charter.
  - Certificates will not be issued unless the applicant has cleared a BIC.

Mailing Address:  
Teacher Certification  
PO Box 83720  
Boise, ID 83720-0027

## 2025-2026 APPLICATION DUE DATES

Alternative Authorizations Due to the Department of Education
November 21, 2025
December 19, 2025*
March 20, 2026*
May 15, 2026*
June 19, 2026*

Due dates are aligned to the ISEE upload dates. Please note, funding will not be impacted if complete applications are received by the above dates.

*\* Assignments that are deficient on these designated ISEE upload dates will result in a reduction of funding. Deficiencies can be determined by running the Assignment Credential Report, located in the ISEE portal. To clear deficiencies, refer to the Assignment Credential Guidance Document.*

State Board Emergency Provisionals are separate applications. These are located on the Alternative Authorization for Districts/Charter Schools [webpage](#).

## APPLICATION TYPES AND ROUTES TO CERTIFICATION – DISTRICT CHECKLIST

### CONTENT SPECIALIST

*The candidate will receive a three (3) year interim non-renewable certificate. The candidate must be enrolled in either a traditional route or enrolled with ABCTE. Candidates must demonstrate content knowledge through the Content/Pedagogy Qualifier.*

#### STATE BOARD APPROVED EDUCATOR PREPARATION PROGRAM

##### **College/University Route**

- Attach official transcripts verifying at least a baccalaureate degree or all coursework completed except student teaching
- Attach the signed formal plan signed by the dean or designee of the College of Education of the college/university
  - *The plan must outline all the required coursework, applicable testing, and/or student teaching to qualify for an Institutional Recommendation for certification/endorsement*

##### **American Board for Certification of Teacher Excellence (ABCTE) Route**

- Attach official transcripts verifying at least a baccalaureate degree
- Attach enrollment verification specifying exact endorsement area aligning to assignment(s) on the application. The enrollment verification must align to the area of endorsement for which the authorization is being requested

**CONTENT/PEDAGOGY ASSESSMENT** – The candidate demonstrates distinct content knowledge and skill through ONE (1) of the following approved qualifiers:

Content Specific Praxis II Score Report

- attach a copy of the official score report

ABCTE Content or Professional Teaching and Knowledge (PTK) Score Report

- attach a copy of the official score report

Baccalaureate Degree in the Content Area of Endorsement

- attach the transcripts which show the degree in the specific content area

[Qualifying Score on the Uniform Standard for Evaluating Content Competency \(Rubric\)](#)

- attach the rubric and official transcripts with applicable coursework highlighted

### PUPIL SERVICE STAFF

*The candidate will receive a three (3) year interim non-renewable certificate.*

#### STATE BOARD APPROVED EDUCATOR PREPARATION PROGRAM

##### **College/University Route**

- Attach the signed formal plan signed by the dean or designee of the College of Education of the college/university
  - *The plan must outline all the required coursework.*
- May be used for School Counselor, School Counselor – Basic, Speech Language Pathologist, School Social Worker, Social Worker and School Psychologist
  - School Psychologist must hold a bachelor's degree in psychology
  - Social Worker will receive a School Counselor – Basic endorsement
  - School Social Worker will receive both School Social Worker and School Counselor - Basic endorsement

## TEACHER TO NEW CERTIFICATE

*The candidate will receive a three (3) year interim non-renewable certificate. The candidate must be enrolled in either a traditional route or enrolled with ABCTE.*

### STATE BOARD APPROVED EDUCATOR PREPARATION PROGRAM

#### ***College/University Route***

- Attach official transcripts verifying at least a baccalaureate degree or all coursework completed except student teaching
- Attach the signed formal plan signed by the dean or designee of the College of Education of the college/university
- The plan must outline all the required coursework, applicable testing, and/or student teaching to qualify for an Institutional Recommendation for certification/endorsement

#### ***ABCTE – only available for obtaining a Standard Instructional Certificate (use Option III if candidate holds a Standard Instructional Certificate)***

- Attach official transcripts verifying at least a baccalaureate degree
- Attach enrollment verification specifying exact endorsement area aligning to assignment(s) on the application. The enrollment verification must align to the area of endorsement for which the authorization is being requested

## TEACHER TO NEW ENDORSEMENT

*Valid for the school year for which the application is requested and approved.*

#### ***Option I: College/University Route***

- Attach signed formal plan signed by the dean of the College of Education
  - *The plan must outline all the required coursework and applicable testing to qualify for an Institutional Recommendation for certification/endorsement*
- May be renewed two (2) additional times with evidence of satisfactory progress – the completion of nine (9) semester credits is required during the authorized school year unless the university plan indicates otherwise or under extenuating circumstances

#### ***Option II: Completed master's degree route in specific content area (applicable to adding an instructional endorsement only) – Non-Renewable***

- Attach a copy of the completed master's degree in the content area of requested endorsement
- Successfully complete a one (1) year state-board approved mentor program in the new endorsement area. The specific mentor program and performance requirement(s) are outlined on the [District/Charter and Mentor Recommendation for Alternative Authorization – Teacher to New Endorsement OPTION II and III Completers form](#)

#### ***Option III: Content area assessment, AND state board-approved mentoring program (applicable to adding an instructional endorsement only) – Non-***

- Renewable***
- Praxis II or ABCTE Assessment – Achieve passing score during the validity period of the one (1) year authorization, or
  - The [Uniform Standard for Evaluating Content Competency](#) (rubric)
    - Attach highlighted transcripts showing applicable credits. *\*Additional assessments are not required if the rubric is submitted with the application, or*
  - BA/BS in the Specific Content Area
  - Successfully complete a one (1) year state-board approved mentor program in the new endorsement area. The specific mentor program and performance requirement(s) are outlined on the [District/Charter and Mentor Recommendation for Alternative Authorization – Teacher to New Endorsement OPTION II and III Completers form](#)

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FOR OFFICIAL USE	Fee	Date Received	Check #	BIC Status	District Signed
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## ALTERNATIVE AUTHORIZATION

2025-2026 SCHOOL YEAR

### DISTRICT/CHARTER SECTION

#### Section I: District/Charter School Information

District/Charter Name	District/Charter Number
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Name of Superintendent/Charter Administrator	Name of Contact Person
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Contact Person's Email Address	Phone Number
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Mailing Address	City	State	Zip Code
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#### Section II: Educator Information

Last Name, First Name and Full Middle Name	Date of Birth
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Maiden Name	EDUID	Hire Date (for this position)
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Email Address	Phone Number
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Mailing Address	City	State	Zip Code
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#### Section III: Select Application Type

Application Type	Fee
<b>Content Specialist – Section IA</b> <i>University/College Route</i> <i>Currently holds a baccalaureate degree or higher:</i> <i>Student teaching start date: _____</i> <i>ABCTE</i>	\$100
<b>Pupil Service Staff – Section IB</b> <i>Degree Status: _____</i>	\$100
<b>Teacher to New – Endorsement/Certificate – Section IC</b> <i>Current Endorsement: _____</i>	\$100

## Section IV: Requested Endorsement and Assignment Information

### 2025-2026 SDE Assignment Credential Manual

Endorsement Name(s)	Endorsement Number(s)	Assignment Number

## Section V: Content Qualifier

Content Specialist – Content Qualifier (Select One)
Content Specific Praxis II Score Report
Baccalaureate Degree in the Content Area of Endorsement
ABCTE Content or Professional Teaching and Knowledge (PTK) Score Report
<a href="#">Qualifying Score on the Uniform Standard for Evaluating Content Competency (Rubric)</a>

## Section VI: District/Charter Designated Mentor

<b>Content Specialist –</b> <i>a mentor is required and will need to provide a minimum of one (1) classroom observation per month, which will include feedback and reflection.</i>	<b>Teacher to New Endorsement – Option II or III</b> <i>The mentor will need to provide ongoing support and formative assessments, which will include feedback and reflection.</i>
Mentor Name:	Mentor Name:
Mentor Title:	Mentor Title:

## Section VII: District/Charter and School Board Attestations – Please Read

Have ensured all the required documents are contained in this application packet and understand that only complete application packets will be processed.

Are aware that an incomplete packet may result in a reduction of district/charter funding and is in violation of [Idaho Code §33-1201](#).

Agree that the endorsement(s) requested align to the assignment(s) the candidate will instruct.

Agree to monitor candidate progress through their program and assure that the candidate maintains a pace to complete the preparation program within the allowable timeframe.

Understand the program may require support through a state board-approved mentor program using the [Idaho Mentor Program Standards](#) or adequate support. Please access the State Board of Education website for more information about the State Board-approved mentor program.

Signature of School Board Chairperson		
Print	Signature	Date
Signature of District Superintendent or Charter Administrator		
Print	Signature	Date



FOR OFFICIAL USE	<input type="checkbox"/> CS	<input type="checkbox"/> TNE	<input type="checkbox"/> AAQEP	<input type="checkbox"/> ABCTE	<input type="checkbox"/> BA or higher	<input type="checkbox"/> Candidate Signature	<input type="checkbox"/> Route I	<input type="checkbox"/> Route II
	<input type="checkbox"/> TNC	<input type="checkbox"/> PSS	<input type="checkbox"/> CAEP	<input type="checkbox"/> CACREP	<input type="checkbox"/> Student Teaching	Route III		
			<input type="checkbox"/> OOS	<input type="checkbox"/> NASP		<input type="checkbox"/> PRAXIS/ABCTE	<input type="checkbox"/> BA	<input type="checkbox"/> RUBRIC

## CANDIDATE SECTION

### Section IA: Educator's Selection of Application Type and Route Selection – Select One Application Type and One Route Selection

Select from either Section IA, IB, or IC. Confirm the route to obtain certification/endorsement and sign

#### Content Specialist – Does not hold a current Idaho Credential

##### **Name of College/University:**

I have enrolled in a college/university certification program and have registered for the courses to be completed during the three (3) year interim validity period. A copy of the signed teacher preparation program plan is included with this application.

I understand that if I do not hold a bachelor's degree, I must be student teaching in the authorized year the school district/charter applies for the Alternative Authorization – Content Specialist.

I understand this certificate is non-renewable. I must complete the university/college program, and any Idaho state specific requirement(s) listed on my credential during the three (3) year validity period before I am eligible to apply for my Idaho Standard Instructional Credential.

If I am using an out-of-state program which is **not** accredited by [CAEP/AAQEP](#), I am aware I will need to obtain certification in the state which recognizes the preparation program and then apply for reciprocity for an Idaho certificate.

If I am using an out-of-state program, I understand I will be required to complete the Idaho Comprehensive Literacy Course or Assessment. I may also be required to complete the Teaching for Mathematical Thinking course during the three (3) year validity period.

Upon completion of the preparation program, and any state specific requirement(s), it is my responsibility to apply to receive my Idaho Standard Instructional Credential. If I were to leave the Idaho district/charter while holding the Content Specialist Interim Certificate, I must notify the new hiring Idaho school to request a letter be sent to the Certification and Professional Standards Department attesting to monitoring my progress to ensure completion of my program.

#### Content Specialist

##### **ABCTE**

I have enrolled in the ABCTE assessment program and have attached enrollment verification specifying the exact endorsement area for which the authorization is being requested.

I understand this certificate is non-renewable. I must complete all applicable ABCTE assessment(s) and state specific requirement(s) listed on my credential during the three (3) year validity period before I am eligible to apply for my Idaho Standard Instructional Credential.

I understand I must complete the two (2) year state-board approved mentoring program during the three (3) year validity period.

I understand I will be required to complete the Idaho Comprehensive Literacy Course or Assessment. I may also be required to complete the Teaching Mathematical Teaching course during the three (3) year validity period.

Upon completion of the ABCTE assessment program, and any state specific requirement(s), it is my responsibility to apply to receive my Idaho Standard Instructional Credential.

If I were to leave the Idaho district/charter while holding the Content Specialist Interim Certificate, I must notify the new hiring Idaho school to request a letter to be sent to the Certification and Professional Standards Department attesting to monitoring my progress to ensure completion of my program.

Signature of Educator		
Print	Signature	Date

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FOR OFFICIAL USE	<input type="checkbox"/> CS	<input type="checkbox"/> TNE	<input type="checkbox"/> AAQEP	<input type="checkbox"/> ABCTE	<input type="checkbox"/> BA or higher	<input type="checkbox"/> Candidate	<input type="checkbox"/> Route I	<input type="checkbox"/> Route II
	<input type="checkbox"/> TNC	<input type="checkbox"/> PSS	<input type="checkbox"/> CAEP	<input type="checkbox"/> CACREP	<input type="checkbox"/> Student Teaching	<input type="checkbox"/> Signature	Route III	
			<input type="checkbox"/> OOS	<input type="checkbox"/> NASP			<input type="checkbox"/> PRAXIS/ ABCTE	<input type="checkbox"/> BA <input type="checkbox"/> RUBRIC

## Section IB: Educator's Selection of Application Type and Route Selection

### Pupil Service Staff

#### ***Name of College/University:***

I have enrolled in a master's program through a college/university certification program and have registered for the courses to be completed during the three (3) year interim validity period. A copy of the signed preparation program plan is included with this application.

I understand this certificate is non-renewable and must complete the university/college program during the three (3) year validity period.

If I am using an out-of-state program which is not accredited by [CACREP](#)/[CSWE](#)/[NASP](#), I am aware I will need to obtain certification in the state which recognizes the preparation program and then apply for reciprocity for an Idaho certificate.

Upon completion of the preparation program, it is my responsibility to apply to receive my Idaho Pupil Service Staff Credential.

If I were to leave the Idaho district/charter while holding the Pupil Service Staff Interim Certificate, I must notify the new hiring Idaho school to request a letter be sent to the Certification and Professional Standards Department attesting to monitoring my progress to ensure completion of my program.

Signature of Educator		
<b>Print</b>	<b>Signature</b>	<b>Date</b>

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FOR OFFICIAL USE	<input type="checkbox"/> CS	<input type="checkbox"/> TNE	<input type="checkbox"/> AAQEP	<input type="checkbox"/> ABCTE	<input type="checkbox"/> BA or higher	<input type="checkbox"/> Candidate	<input type="checkbox"/> Route I	<input type="checkbox"/> Route II
	<input type="checkbox"/> TNC	<input type="checkbox"/> PSS	<input type="checkbox"/> CAEP	<input type="checkbox"/> CACREP	<input type="checkbox"/> Student Teaching	<input type="checkbox"/> Signature		
			<input type="checkbox"/> OOS	<input type="checkbox"/> NASP			Route III	
							<input type="checkbox"/> PRAXIS/ ABCTE	<input type="checkbox"/> BA <input type="checkbox"/> RUBRIC

## Section **IC**: Educator's Selection of Application Type and Route Selection

### Teacher to New Certificate/Endorsement – Option I (Currently holds an Idaho credential)

#### **Name of College/University:**

I have enrolled in a college/university certificate and/or endorsement program and have registered for the applicable courses. A copy of the signed preparation program plan is included with this application. If issued a three (3) year non-renewable interim certificate, I understand I must complete the program during the three (3) year validity period.

If issued a one (1) year authorization, I must demonstrate adequate progress toward the completion of my endorsement program for my district/charter to apply for renewal of the Alternative Authorization – Teacher to New endorsement. Furthermore, I understand the authorization is eligible for two (2) renewals with the completion of nine (9) semester credits annually or as outlined by the university plan.

If I am using an out-of-state program which is not accredited by [CAEP/AAQEP](#), I am aware I may be required to obtain certification in the state which recognizes the preparation program and then apply for reciprocity for an Idaho certificate.

I understand I may be required to complete the Idaho Comprehensive Literacy Course or Assessment and/or the Teaching for Mathematical Thinking courses during the three (3) year validity period.

Upon completion of the preparation program, and any state specific requirement(s), it is my responsibility to apply to revise my Idaho Standard Instructional Credential.

If I were to leave the Idaho district/charter while holding the Teacher to New Interim Certificate, I must notify the new hiring Idaho school to request a letter to be sent to the Certification and Professional Standards Department attesting to monitoring my progress to ensure completion of my program.

### Teacher to New Certificate – Option I (Holds an Administrator, or Pupil Service Staff)

#### **ABCTE**

I have attached enrollment verification specifying the exact endorsement area in the ABCTE assessment program for which the authorization is being requested.

I understand I have the three (3) year validity period to complete all applicable assessments and state specific requirement(s).

I understand I must complete the two (2) year state-board approved mentoring program during the three (3) year validity period before I am eligible to apply for a revision of my current Idaho credential.

I understand I may be required to complete the Idaho Comprehensive Literacy Course or Assessment and/or the Teaching for Mathematical Thinking courses during the three (3) year validity period.

Upon completion, it is my responsibility to apply for a revision of my current Idaho Credential to add the new endorsement.

If I were to leave the Idaho district/charter while holding the Teacher to New Interim Certificate, I must notify the new hiring Idaho school to request a letter to be sent to the Certification and Professional Standards Department attesting to monitoring my progress to ensure completion of my program.

**Teacher to New Endorsement – Option II (Currently holds an Idaho certificate)**

***Master’s Degree in Specific Content Area AND complete a one-year state board approved mentoring program***

I have attached a copy of the completed master’s degree transcripts aligning to the new endorsement area being requested.

I understand I must complete the one (1) year state-board approved mentoring program during the authorized school year before I am eligible to apply for a revision of my current Idaho credential.

I understand I may be required to complete the Idaho Comprehensive Literacy Course or Assessment and the Teaching Mathematical Teaching courses during the one (1) year non-renewable authorization year. Refer to the certificate for specific requirements.

Upon completion, it is my responsibility to apply for a revision of my current Idaho Credential to add the new endorsement.

**Teacher to New – Option III (Currently holds an Idaho certificate)**

***Content Assessment – Choose one assessment AND complete a one-year state board approved mentoring program***

**Praxis Assessment or ABCTE Assessment**

I must either obtain a qualifying score on the applicable Praxis II assessment(s) or ABCTE assessment(s) which aligns to the new endorsement area during the authorized school year.

I understand I must complete the one (1) year state-board approved mentoring program during the authorized school year before I am eligible to apply for a revision of my current Idaho credential.

I understand I may be required to complete the Idaho Comprehensive Literacy Course or Assessment and the Teaching for Mathematical Thinking courses during the one (1) year non-renewable authorization year. Refer to the certificate for specific requirements.

Upon completion, it is my responsibility to apply for a revision of my current Idaho Credential to add the new endorsement.

**BA in the Specific Content Area**

I understand I must complete the one (1) year state-board approved mentoring program during the authorized school year before I am eligible to apply for a revision of my current Idaho credential.

I understand I may be required to complete the Idaho Comprehensive Literacy Course or Assessment and the Teaching for Mathematical Thinking courses during the one (1) year non-renewable authorization year. Refer to the certificate for specific requirements.

Upon completion, it is my responsibility to apply for a revision of my current Idaho Credential to add the new endorsement.

**Uniform Standard for Evaluating Content Competency**

I must meet or exceed the required number points in the content area using the Uniform Standards for Evaluating Content Competency (rubric).

I understand I must complete the one (1) year state-board approved mentoring program during the authorized school year before I am eligible to apply for a revision of my current Idaho credential.

I understand I may be required to complete the Idaho Comprehensive Literacy Course or Assessment and the Teaching for Mathematical Thinking courses during the one (1) year non-renewable authorization year. Refer to the certificate for specific requirements.

Upon completion, it is my responsibility to apply for a revision of my current Idaho Credential to add the new endorsement.

Signature of Educator		
Print	Signature	Date

## CANDIDATE SECTION

### Section II: Licensing History

You must answer “yes” to each question that applies to you, even if you have answered “yes” on a previous application.

**IMPORTANT:** Discrepancies in this section will result in a denial of an educator credential.

1. **Have you ever had an educator or teacher license/certificate application denied by any professional licensing authority?**  
Yes                      No
2. **Have you ever had disciplinary action taken against a professional license/certificate?**  
**Disciplinary action on a license/certificate includes revocation, suspension, probation, letters of reprimand, or conditions imposed by a professional licensing authority.**  
Yes                      No
3. **Have you ever voluntarily surrendered a professional license/certificate to avoid disciplinary proceedings by a professional licensing authority?**  
Yes                      No
4. **Are there pending disciplinary proceedings or investigations against your license/certificate by a professional licensing authority?**  
Yes                      No

**All applicants answering yes – Include a detailed written explanation for each question marked “yes”. You do not need to re-submit a written explanation if you have previously provided one.**

### Section III: Legal History

As part of the application process, the Idaho Department of Education may conduct a background investigation check, which involves a review of criminal history such as arrests and misdemeanor or felony convictions.

*Note: If you have provided these documents with a previous application, you do not need to re-submit them.*

**By signing this application, I acknowledge that I may be required to provide additional information, such as court records.**

- **Felonies** – To expedite your application, include a detailed written explanation and court records for each conviction.
- **Misdemeanors** – There is no need to submit documentation with your application for misdemeanor arrest and/or convictions. We will contact you if we need any information.

**IMPORTANT:** Failure to respond to a request for information will result in your application not being approved.

## Section IV: Attestations and Signature

*Read and initial the statements below.*

I attest and affirm that I have read the Code of Ethics for Idaho Professional Educators (for a copy, go to <https://www.sde.idaho.gov/cert-psc/shared/ethics/code-of-ethics-for-professional-educators.pdf>).

I attest and affirm that all statements made by me on this application are true and correct to the best of my knowledge.

I understand that it is a violation of the Code of Ethics for Idaho Professional Educators to make any false statement(s) on this application or required documents. Disciplinary action, which may include revocation, suspension, denial, letter of reprimand, or conditions, may be imposed under Section 33-1208, Idaho Code.

I understand that it is my responsibility to keep my mailing address updated with the Idaho Department of Education at all times. Failure to do so may result in not receiving legal/licensing documents related to my credential.

**Failure to initial and sign will result in an incomplete application and the application will not be processed.**

Signature of Applicant (Electronic signatures will not be accepted)	Date