

Application Packet for Public Charter School Administrator Certificate New & Renewal

THIS APPLICATION IS FOR A PUBLIC CHARTER SCHOOL BOARD OF DIRECTORS TO HIRE A PUBLIC CHARTER SCHOOL ADMINISTRATOR UNDER THE PROVISIONS OF IDAHO CODE §33-5206(4).



IDAHO STATE DEPARTMENT OF EDUCATION
CERTIFICATION & PROFESSIONAL STANDARDS

650 W STATE STREET, 2ND FLOOR
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INFORMATION

- Allows a public charter school board of directors to request certification for a candidate that does not hold an Administrator Certificate to serve as a certificated Charter School Administrator.
- Only valid for requesting public charter school
- Valid for five (5) years and is renewable contingent upon continued employment at requesting public charter school, completing of six (6) semester credits for renewal as set forth in IDAPA 08.02.02.060 of which three (3) semester credits must be a state board approved course in the statewide framework for teacher evaluations (Idaho Code §33-1204).
- Certificate becomes invalid upon separation of employment at requesting public charter school.
- Certificate is not a valid nor recognized certificate for the National Association of State Directors of Teacher Education and Certification (NASDTEC) interstate reciprocity agreement.

PUBLIC CHARTER SCHOOL AND CANDIDATE CHECKLIST

COMPLETE PACKET MUST INCLUDE THE FOLLOWING

- ☐ **Completed and signed Public Charter School Administrator Certificate Application Form**
- ☐ **Candidate Licensing and Legal History Form**
 - The candidate must complete and sign this form.
- ☐ **Background Investigation Check (BIC), associated forms and fee**
 - Include the necessary completed fingerprint card, the associated forms, and the applicable fee. Certificates will not be issued unless the applicant has cleared a BIC. See our [Background Investigation Check website](#) for current guidelines, fees and information to obtaining fingerprint card and associated forms.
 - Renewal applicants do not need a new fingerprint card.
- ☐ **Official Transcripts**
 - Attach official transcripts verifying baccalaureate degree or higher from an accredited four (4) year institution
 - Official transcript verifying three (3)-semester credit course in the statewide framework for teacher evaluations, which must include a laboratory component.
 - List of state board approved courses can be found at the [State Board of Education's Administrative Certificate Renewal Requirement website](#).
- ☐ **Official letter from public charter school board of directors stating the board of directors has carefully considered the applicant's candidacy and has chosen to hire the applicant.**
 - Letter must include a commitment to overseeing and evaluating the applicant's performance.

☐ **Must include official documentation verifying one of the following:**

- ☐ Five (5) or more years of experience administering a public charter school
 - Signed and completed [Certificated Professional Experience Report](#)
- ☐ Post-baccalaureate degree and a minimum of five (5) years of experience in one of the following:
 - Signed and completed [Certificated Professional Experience Report](#) indicating one of the following:
 - ☐ School administration
 - ☐ Public administration
 - ☐ Business administration
 - ☐ Military administration
- ☐ Successful completion of a nationally recognized charter school leader's fellowship
 - Certificate of Completion and documentation fellowship is nationally recognized.
- ☐ Five (5) or more years of teaching experience and a mentor from an administrator from a public charter school in academic, operational, and financial good standing.
 - Signed and completed [Certificated Professional Experience Report](#)
 - Mentor must agree to mentor the candidate for a minimum of one (1) year
 - Name of Mentor: _____
 - Public Charter School of Mentor: _____

☐ **Application fee - \$75:**

- Check or money order is to be made payable to the State Department of Education or SDE. Credit cards are not accepted. Cash in exact amount will be accepted for walk-ins. Payment is non-refundable. One check or money order for both application and BIC fees is acceptable.

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THIS SECTION FOR OFFICIAL USE ONLY	Fee	Date Paid	Check #	Date Entered	Date Issued	Date Expired	BIC Status
5-yrs Experience	Post-baccalaureate degree and <input type="checkbox"/> School administration <input type="checkbox"/> Public administration <input type="checkbox"/> Business administration <input type="checkbox"/> Military administration			Charter Leadership Fellowship		5-yrs teach with mentorship	

PUBLIC CHARTER SCHOOL ADMINISTRATOR CERTIFICATE APPLICATION FORM

Must be completed by member of the public charter school board of directors and candidate.

Please make sure **all** items are completed.

☐ NEW APPLICATION

☐ RENEWAL APPLICATION

CHARTER SCHOOL SECTION	
Section I: Public Charter School Information	
Public Charter School Name	Charter #
Name of Charter School Board of Directors Member	
Email Address	Phone #
Mailing Address	City, State, Zip Code
Section II: Candidate Demographic Information	
Full Legal Name	Birth Date
Maiden/Other Name	Hire Date (for this position)
Email Address	Phone #
Mailing Address	City, State, Zip Code
Section III: Public School Charter Board of Directors Attestations	
<p>We, the undersigned:</p> <p><input type="checkbox"/> I attest and affirm that the charter board of directors will oversee and evaluate the applicant's performance.</p> <p><input type="checkbox"/> I attest and affirm that the charter board of directors have verified all the required documents are contained in the application packet.</p> <p><input type="checkbox"/> I understand that only a completed application packet will be reviewed and processed.</p>	
Charter Board of Directors Chairperson	Signature Date

CANDIDATE SECTION**Section IV: Candidate Qualifications**

Education – Please check the highest degree earned:

- | | |
|--|--|
| <input type="checkbox"/> Baccalaureate Degree | <input type="checkbox"/> Master's Degree |
| <input type="checkbox"/> Educational Specialist Degree | <input type="checkbox"/> Doctorates Degree |
| <input type="checkbox"/> Other _____ | |

Include official transcripts.

Professional Experience

or

Charter School Fellowship

- | | |
|---|---|
| <input type="checkbox"/> Signed and completed Professional Experience Report verifying five (5) years of experience in one of the following: <ul style="list-style-type: none"><input type="checkbox"/> Public School Charter Administrator<input type="checkbox"/> School administration<input type="checkbox"/> Public administration<input type="checkbox"/> Business administration<input type="checkbox"/> Military administration<input type="checkbox"/> Teaching | <input type="checkbox"/> Certificate of Completion of nationally recognized charter school leader's fellowship. |
|---|---|

Include documentation fellowship is nationally recognized.

Renewal Only

- ☐ Completed state board approved three (3)-semester credit course in the statewide framework for teacher evaluations required for administrators.
- ☐ Completed additional three (3) credits or equivalent in-service hours related to school administration

Include official transcripts and, if applicable, completed Verification of In-service Form.

Section IV: Candidate Attestations

- ___ I understand that this certificate is valid for the requesting public charter school only.
- ___ I understand that separation of employment with requesting public charter school will invalidate certificate.
- ___ I understand that only a completed application packet will be reviewed and processed.

Signature of Candidate:

Date:

CANDIDATE LICENSING AND LEGAL HISTORY FORM

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

IMPORTANT: *Discrepancies in this section will result in denial of educator or teacher license/certificate.*

1. Have you ever had an educator or teacher license/certificate denied by any professional licensing authority?

☐ Yes ☐ No

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 of each licensing issue. You do not need to re-submit a written explanation if you have previously provided one.

Legal History As part of the application process, the State Department of Education may conduct a background investigation check, which involves a review of criminal history such as arrests and misdemeanor or felony convictions. You must check the box below.

☐ I acknowledge that I may be required to provide additional information, such as court records.

- **Felonies** - In order to expedite your application, please include a detailed written explanation of each felony criminal issue and a copy of the judgment of conviction for any felony conviction. If you have provided these documents with a previous application, you do not need to re-submit them.
 - A printout from the State Judiciary repository will NOT be accepted as relevant court documents.
 - Please obtain court records from the courthouse.
- **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 additional information

IMPORTANT – Failure to respond to a request for information will result in denial of educator or teacher license/certificate.

Attestations and Signature

☐ I attest and affirm that I have read the *Code of Ethics for Idaho Professional Educators*. (For a copy of the *Code of Ethics*, go to <http://sde.idaho.gov/cert-psc/psc/ethics.html>.)

☐ 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 penalties, which may include revocation, suspensions, denial, or conditions, will be imposed under Section 33-1208, Idaho Code, for making any false statement(s) on this application or required documents.

Signature of Candidate:

Date: