

# FLORIDA COUNCIL OF PRIVATE SCHOOLS

## Teacher Certification Pack (revised 101117)

### 4 Certification Classifications

Elementary  
(K - 5<sup>th</sup>)

Middle  
(6<sup>th</sup> - 8<sup>th</sup>)

H/S  
(9<sup>th</sup> – 12<sup>th</sup>)

Admin

**Note:** *If desired, H/S Applicants may request certification for single subjects.*

### Teacher Certification “Levels & Requirements”

#### **C Level**

H/S diploma or GED, 18 years of age

Minimum two years successful teaching experience with the same curriculum at the same or higher grade level. {Form T5}

Mastery of skills for the levels in which certification is desired. Mastery tests from FCPS may be required.

A recommendation from the present employer/administrator of the FCPS accredited school (Form T6)

#### **B Level**

H/S diploma or GED, 18 years of age

Minimum two years successful teaching experience

AA degree or 2 years Competency Equivalence Credits. (2 years C.E.C. takes 4 years of successful teaching at required same grade level or higher.) (Form T5)

Mastery of skills for the levels in which certification is desired. Mastery tests from FCPS may be required.

A recommendation from the present employer/administrator of the FCPS accredited school (Form T6)

#### **A Level**

H/S diploma or GED, 18 years of age

Minimum two years successful teaching experience

Minimum Bachelor’s Degree, or AA degree with 2 C.E.C. (4 years of successful teaching experience with same curriculum at same or higher grade level) (Form T5)

Mastery of skills for the levels in which certification is desired. Mastery tests from FCPS may be required.

A recommendation from the present employer/administrator of the FCPS accredited school (Form T6)

# FLORIDA COUNCIL OF PRIVATE SCHOOLS

## **APPLICATION FOR TEACHER CERTIFICATION**

Name \_\_\_\_\_ Date \_\_\_\_\_

FCPS School \_\_\_\_\_ Birth Date \_\_\_\_\_

Hm addr \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Hm ph# \_\_\_\_\_ E-mail address \_\_\_\_\_

### **Circle The "Classification" For Which You Are Applying**

Elementary  
(K - 5<sup>th</sup>)

Middle  
(6<sup>th</sup> - 8<sup>th</sup>)

H/S  
(9<sup>th</sup> - 12<sup>th</sup>)

Admin

If applying for certification in single h/s subjects, list here

\_\_\_\_\_

### **Complete Checklist**

- \_\_\_ Copy of highest diploma/degree enclosed
- \_\_\_ Min. 2 yrs successful teaching experience at level desired, same curriculum
- \_\_\_ Mastery of skill at grade Classification desired?
- \_\_\_ Form T5 enclosed
- \_\_\_ Form T6 enclosed
- \_\_\_ App Fee, \$45, enclosed

### **"Level" Of Certification Requested**

- \_\_\_ Teacher Level "C" requested
- \_\_\_ Teacher Level "B" requested
  - \_\_\_ AA degree or higher (or sufficient C.E.C. credits)
- \_\_\_ Teacher Level "A" requested
  - \_\_\_ Bachelors Degree or higher, or AA degree with sufficient C.E.C. credits
- \_\_\_ Administrator Certification (*submit copy of Bachelors Degree or higher & resume*)  
(Forms T5 & T6 not applicable for Administrator)

Initial App Fee \$45

Annual Renewal \$15

# FLORIDA COUNCIL OF PRIVATE SCHOOLS

## Form “T6”

### Employer’s Recommendation

#### *Section I. Integrity Agreement*

The undersigned persons certify that the applicant is a person of good moral and ethical character, has not been found guilty of abuse with minors, and they agree to notify FCPS immediately if circumstances change (for example if an ethical, moral or legal breach occurs).

#### *Section II. Signature of both the applicant and the school administrator*

Yes, the applicant is recommended for certification with FCPS.

Signature of administrator \_\_\_\_\_

date signed \_\_\_\_\_

Yes, I assent to the Integrity Agreement in Section I.

Signature of applicant \_\_\_\_\_

date signed \_\_\_\_\_

# FLORIDA COUNCIL OF PRIVATE SCHOOLS

## Form "T5"

### Verification of Teaching Experience and/or App for C.E.C. Credits

\_\_\_\_\_ Ck if needing to acknowledge for C.E.C. credits

Name of Applicant \_\_\_\_\_ Date \_\_\_\_\_

Addr \_\_\_\_\_ City \_\_\_\_\_

Zip \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

#### *Employer: Please complete the following section.*

The applicant has teaching experience as follows:

<u>(Dates)</u>	<u>School/City</u>	<u>Curriculum Used</u>	<u>Grade Level(subject for H.S.)</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Signature of Administrator \_\_\_\_\_

FCPS School \_\_\_\_\_ City \_\_\_\_\_

**Note:** FCPS will grant one-year competency equivalency credit toward college requirement for every two years of competent teaching experience (maximum of 2 years C.E.C can be earned). To document competence, **enclose the Class Summary Sheets of the national standardized tests for the classes taught by the applicant during the years for which credit is requested.**