




**NBPTS Processing Center**  
11827 Tech Com, Suite 200  
San Antonio, TX 78233  
1-800-22TEACH® phone • (888) 811-3514 fax  
[www.nbpts.org](http://www.nbpts.org)

**National Board Certification®**  
**Eligibility Verification**  
**Forms and Instructions**

*Effective 2009*



*National Board Certification  
Promotes Better Teaching,  
Better Learning, Better Schools*

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## INSTRUCTIONS

**NOTE:** Candidates who are receiving full fee support from the state of **North Carolina** are not required to complete these forms. Eligibility for these candidates will be verified electronically by the state.

Candidates who are receiving fee support from the state of **Florida** should first check with their DHETP District Coordinator to verify all eligibility requirements. If the candidate's DHETP District Coordinator cannot verify eligibility, candidates will need to submit eligibility forms directly to the National Board for Professional Teaching Standards® (NBPTS®).

Candidates who meet the requirements listed below may use the combined **Candidate Eligibility Verification Form**:

- (1) have worked for at least three years at the same state-supported school district
- (2) are required to hold at least a bachelor's degree for employment at this school
- (3) are required to hold a current state teaching license (or school counseling license for candidates who applied for the ECYA/School Counseling certificate) for employment at this school

Any candidate who does not meet the requirements listed above must complete and submit the following forms:

- **Candidate Education Verification Form**
- **Candidate Employment Verification Form**
- **Candidate License Verification Form**
- **Candidate Workplace Verification Form**

All of the forms listed above are included in this document. All eligibility verification forms must be received on or before **January 31, 2010**, at the:

**NBPTS PROCESSING CENTER  
11827 TECH COM, SUITE 200  
SAN ANTONIO, TX 78233**

Assessment center testing is scheduled to occur **January 4–June 15, 2010**. You must verify your eligibility for candidacy and pay your full assessment fee prior to receiving your Authorization to Test, which allows you to attend the assessment center. You may schedule your assessment center appointment as soon as you receive your Authorization to Test letter. Scheduling your appointment early gives you the best opportunity to test on the date and at the center of your choice.

You are urged to submit the required eligibility verification forms to NBPTS as promptly as possible. If NBPTS does not receive these completed forms by the **January 31, 2010**, deadline, you will be declared ineligible for **2009** National Board Certification®, you will be unable to take assessment center exercises, and any submitted portfolio entries will not be scored.

**ECYA/School Counseling Candidates:** To apply for this certificate area, you must have been employed as a school counselor (not as a classroom teacher) at the pre-K through 12 level for a minimum of three years, meet the licensure requirements established by your state for a "school counselor," and have held that valid license during those years of employment.

## DETERMINING YOUR ELIGIBILITY

Before you begin work on your portfolio, follow the steps in this section to determine whether or not you meet the eligibility requirements for National Board Certification. To be eligible, you must submit proof that you meet all employment, licensure, and education requirements **prior to the date you applied for candidacy**. Because teaching situations vary widely across the country, candidates are strongly urged to call 1-800-22TEACH® to clarify these rules prior to applying and making payment, as the application charge and initial fee are nonrefundable.

## Step 1: Education

You must possess a bachelor's, master's, or doctoral degree from an accredited institution—defined as a university or college that is authorized or accepted by a state as fulfilling the state's educational requirement for initial teaching or school counseling licensure. (Completion of degree requirements without award of a degree is not acceptable verification of the education requirement.) If you hold a degree awarded by an institution outside the United States, you may need to submit proof that the degree is equivalent to at least a bachelor's degree from an accredited institution (see instructions on page 7).

**Do you possess a bachelor's, master's, or doctoral degree from an accredited institution (or its documented equivalent), awarded prior to the date you applied for candidacy?**

**Yes** → **Go to Step 2.**

**No** → **Stop.** You are not eligible for National Board Certification. Complete and submit the Withdrawal Form.

## Step 2: Employment

You must have completed three years of successful teaching (or successfully served three years as a school counselor if you applied for the ECYA/School Counseling certificate) at one or more early childhood, elementary, middle, or secondary school(s).

- The three years of employment **must have been completed prior to the date you applied for candidacy.**
- The three years of employment must have taken place in one or more facilities located within the United States or accredited by one of several regional agencies recognized by the U.S. Secretary of Education. If employed by a school outside the United States, you must submit a letter from one of these agencies specifying that the school at which you were employed was accredited during the period of your employment. (A list of relevant regional accrediting agencies is provided on page 8.)
- You must have held a valid state license (not an intern or a similar license) during the three years of employment you verify.
- Successful teaching or school counseling, at a minimum, means that your teaching or school counseling license was unencumbered (e.g., not suspended or revoked) during the period of employment.

### Administrative/Adult Learner Teaching Positions

If you are a teacher in an administrative position or a teacher who is teaching in the adult learner community, you may pursue National Board Certification in any certificate area except ECYA/School Counseling only if you are able to provide evidence of three years of classroom teaching (or the equivalent) at the pre-K through 12 level.

### Part-Time or Substitute Teaching

If you teach part time, you are eligible in any certificate area except ECYA/School Counseling, provided your teaching employment is equivalent to three years of full-time teaching. (For example, if your teaching assignment is 50% of a full-time assignment at your school/district, you must have taught for at least six years.) If you are a substitute teacher, you may count teaching time spent in long-term assignments toward the three years, but not short-term or on-call assignments, provided you did so under a valid state teaching license.

### Part-Time School Counseling

If you serve as a school counselor part time, you are eligible to be an ECYA/School Counseling candidate, provided your counseling employment is equivalent to three years of full-time counseling. (For example, if your school counseling assignment is 50% of a full-time assignment at your school/district, you must have served as a school counselor for at least six years.)

**The following do *not* count toward the employment requirement:**

- Employment as an administrator
- Student teaching or teaching internships (or student practica or school counseling internships)
- Employment as a teacher's assistant
- Postsecondary teaching at a community college or university/college. If you teach students over the age of 18, you must teach at the pre-K through 12 level (e.g., vocational classes in a high school setting).
- Employment under an intern or a similar teaching license

**Have you completed three years of successful teaching (or three years successfully serving as a school counselor if you applied for the ECYA/School Counseling certificate) at one or more early childhood, elementary, middle, or secondary schools, as defined on page 4?**

**Yes → Go to Step 3.**

**No → Stop.** You are not eligible for National Board Certification. Complete and submit the Withdrawal Form.

## Step 3: License

You must have held a valid state teaching license (or have met the licensure requirements established by your state for a "school counselor" and held that valid license if you applied for the ECYA/School Counseling certificate) for each of the three years of employment you verify in Step 2. Employment under intern or similar licensure does not meet the licensure prerequisite. In addition, your license must have been unencumbered (e.g., not suspended or revoked) during your employment as a teacher or school counselor. Candidates who are currently teaching in a facility that requires a state-issued license must hold a valid license from the time of National Board Certification application and throughout their candidacy period.

If you applied for a certificate area other than ECYA/School Counseling and part or all of the employment you are verifying in Step 2 was served at a facility in which a state teaching license was not required, you should use the Candidate Workplace Verification Form to document that employment. You will need to provide information on that form that verifies that the facility or facilities for which a state license wasn't required (e.g., private school, parochial school, school outside the United States, or early childhood facility) are recognized and approved by the state to operate. Candidates for ECYA/School Counseling must have held a valid state school counseling license during the years of employment verified.

**If you applied for a certificate area other than ECYA/School Counseling, were you required by the state to have a valid teaching license for the three years of employment in Step 2?**

**Yes →**

**Did you hold a valid teaching license (not an intern or a similar license) for the three years of employment, as required by your state?**

**Yes →** If you also meet the education and employment requirements defined in Steps 1 and 2, you are eligible to pursue National Board Certification. Go to the next section. If you are unable to use the combined Candidate Eligibility Verification Form, complete and submit the Candidate License Verification Form with a copy of your teaching license.

**No → Stop.** You are not eligible for National Board Certification. Complete and submit the Withdrawal Form.

**No →**

**Was the facility in which you taught for the three years of employment approved by the state to operate?**

**Yes →** If you also meet the education and employment requirements defined in Steps 1 and 2, you are eligible to pursue National Board Certification. Go to the next section. Complete and submit the Candidate License Verification Form; fill out the top portion of the Candidate Workplace Verification Form and give it to your employer to complete and submit to NBPTS.

**No → Stop.** You are not eligible for National Board Certification. Complete and submit the Withdrawal Form.

**If you applied for the ECYA/School Counseling certificate, were you required by the state to have a valid school counseling license for the three years of employment in Step 2?**

- Yes** → If you also meet the education and employment requirements defined in Steps 1 and 2, you are eligible to pursue National Board Certification. Go to the next section. If unable to use the combined Candidate Eligibility Verification Form, complete and submit the Candidate License Verification Form with a copy of your school counseling license.
- No** → **Stop.** You are not eligible for National Board Certification. Complete and submit the Withdrawal Form.

## COMPLETING AND SUBMITTING REQUIRED FORMS

Almost all verification forms request information from you and from institutions. Because it may take time for the institution(s) to complete and submit these forms, NBPTS encourages you to submit them to the appropriate institution(s) as soon as possible after receipt. Before you submit any forms to an institution, complete the following steps:

- Complete your portion of the forms as instructed.
- Sign your name.
- Apply the enclosed bar code labels.

Remember that you will sign these forms attesting that the information is accurate.

It is your responsibility to follow up with these institutions and to confirm receipt of all forms by NBPTS. You can verify this receipt of your forms by accessing your account via *My Profile* ([www.nbpts.org/myprofile](http://www.nbpts.org/myprofile)) or by calling 1-800-22TEACH. Have your candidate ID number available when you call.

### Candidate Eligibility Verification Form

**If you applied for a certificate other than ECYA/School Counseling**, and you meet all the criteria below, you are eligible to complete this combined form instead of the separate verification forms. Provide the correct information as instructed, apply a bar code label, and give the form to your employer to complete and submit. **No other verification forms are required of you.**

To complete the combined form, you must:

- have taught at the pre-K through 12 level the required three years (or the equivalent) at the same state-supported school prior to the date you applied for candidacy
- hold a bachelor's, master's, or doctoral degree from an accredited institution (or its equivalent)
- hold a valid state teaching license and have held such a license for the three years of employment you verify

**If you have applied for the ECYA/School Counseling certificate**, and you meet the criteria below, you are eligible to complete the combined form instead of the separate verification forms. **No other verification forms are required of you.**

You must:

- have been employed as a school counselor (not as a classroom teacher) at the pre-K through 12 level for the required three years (or the equivalent) at the same state-supported school prior to the date you applied for candidacy
- hold a bachelor's, master's, or doctoral degree from an accredited institution (or its equivalent)
- meet the licensure requirements established by your state for a "school counselor"
- have held that current, valid school counseling (not teaching) license issued by your state during those years of employment

# Candidate Education Verification Form

To complete this form, be sure to do the following:

- Fill in all information above the Educational Institution Officer box.
- Sign the form on the signature line.
- Apply a bar code label.

Then,

- send the form to the educational institution that conferred your bachelor's, master's, or doctoral degree; **or**
- apply online for degree verification at [www.degreeverify.com](http://www.degreeverify.com), and submit their degree-verification certificate along with your Education Verification Form to NBPTS. (Any other degree verification service may not be acceptable. For this option, the educational institution officer does not need to sign the Education Verification Form.); **or**
- submit an official transcript with your Education Verification Form to NBPTS. For this option, the educational institution officer's signature is not required.

If your degree was awarded by an institution outside the United States and your state determined the equivalency of your degree to issue you a state teaching or school counseling license, you may attach to the form copies of (1) the state's credentialing report and (2) your current license. You will not need to verify equivalency through a National Association of Credential Evaluation Services (NACES) institution. If your state did not do this, you will need to submit transcripts to an organization belonging to NACES and attach the resulting documentation on organization letterhead to the form. Following is a table of NACES organizations. (You can find organization Web sites and e-mail addresses at [www.naces.org/members.htm](http://www.naces.org/members.htm).)

NATIONAL ASSOCIATION OF CREDENTIAL EVALUATION SERVICES (NACES) MEMBERS		
<b>Academic Evaluation Services, Inc.</b> 7230 Fletcher Ave., Ste. 106 Tampa, FL 33637 (813) 490-6274 FAX: (813) 490-6275	<b>E-Val Reports</b> 10924 Mukilteo Speedway, #290 Mukilteo, WA 98275 (425) 349-5199 FAX: (425) 349-3420	<b>International Academic Credential Evaluators, Inc.</b> PO Box 2465 Denton, TX 76202-2465 (940) 383-7498 FAX: (940) 382-4874
<b>Center for Applied Research, Evaluations, &amp; Education, Inc.</b> PO Box 18358 Anaheim, CA 92817 (714) 237-9272 FAX: (714) 237-9279	<b>Evaluation Service, Inc.</b> 333 W. North Ave. #284 Chicago, IL 60610 (847) 477-8569 FAX: (312) 587-3068	<b>International Consultants of Delaware, Inc.</b> PO Box 8629 Philadelphia, PA 19101-8629 (215) 222-8454 FAX: (215) 349-0026
<b>Educational Credential Evaluators, Inc.</b> PO Box 514070 Milwaukee, WI 53203-3470 (414) 289-3400 FAX: (414) 289-3411	<b>Foreign Academic Credential Service, Inc.</b> PO Box 400 Glen Carbon, IL 62034 (618) 656-5291 FAX: (618) 656-5292	<b>International Education Research Foundation, Inc.</b> PO Box 3665 Culver City, CA 90231-3665 (310) 258-9451 FAX: (310) 342-7086
<b>Educational Perspectives, NFP</b> PO Box 618056 Chicago, IL 60661-8056 (312) 421-9300 FAX: (312) 421-9353	<b>Foreign Educational Document Service</b> PO Box 4091 Stockton, CA 95204 (209) 948-6589	<b>Josef Silny &amp; Associates, Inc.</b> <b>International Education Consultants</b> 701 SW 102 Ave. Miami, FL 33173 (305) 273-1616 FAX: (305) 273-1338
<b>Educational Records Evaluation Service, Inc.</b> 601 University Ave., Ste. 127 Sacramento, CA 95825-8309 (916) 921-0790 FAX: (916) 921-0793	<b>Foundation for International Services, Inc.</b> 14926-35th Ave. West, Ste. 210 Lynnwood, WA 98087 (425) 248-2255 FAX: (425) 248-2262	<b>Spantran Educational Services, Inc.</b> 7211 Regency Square Blvd., Ste. 205 Houston, TX 77036-3197 (713) 266-8805 FAX: (713) 789-6022
<b>Education Evaluators International, Inc.</b> 11 South Angell St., #348 Providence, RI 02906 (401) 521-5340 FAX: (401) 437-6474	<b>Global Credential Evaluators, Inc.</b> PO Box 9203 College Station, TX 77842-9203 (512) 528-0908 FAX: (512) 528-9293	<b>World Education Services, Inc.</b> PO Box 5087 Bowling Green Station New York, NY 10274-5087 (212) 966-6311 FAX: (212) 739-6100
<b>Education International, Inc.</b> 29 Denton Rd. Wellesley, MA 02482 (781) 235-7425 FAX: (781) 235-6831	<b>Global Services Associates</b> 2554 Lincoln Blvd., #445 Marina Del Rey, CA 90291 (310) 828-5709 FAX: (310) 828-5709	

# Candidate Employment Verification Form

To complete this form, be sure to do the following:

- Fill in all information above the School Administrator/Principal OR District Employment Officer box.
- Sign on the signature line.
- Apply a bar code label.
- Send the form to the personnel office of each facility for which you are verifying employment to meet the three-year teaching or school counseling requirement.
- Be sure to record the date you applied for candidacy.
- Have each facility complete and submit the form to NBPTS.
- Be sure to ask for documentation of employment only as a teacher (or only as a school counselor if you applied for the ECYA/School Counseling certificate) at an early childhood, elementary, middle, or secondary school.

Each form should show the length of employment you are verifying from that facility. Do not include information on the form about employment in a nonteaching, noncounseling position (e.g., principal) or at a level outside the range of early childhood through secondary school (e.g., college or university teaching).

If you are verifying employment at an institution outside the United States, you must (1) complete and submit a Candidate Workplace Verification Form for that employer and (2) provide documentation from one of the accrediting agencies recognized by the U.S. Secretary of Education. Following are the two regional accrediting agencies that handle institutions outside the United States.

REGIONAL INSTITUTIONAL ACCREDITING AGENCIES	
<p><b>Middle States Association of Colleges and Schools, Commission on Higher Education</b> Jean Avnet Morse, President 3624 Market St. Philadelphia, PA 19104 (267) 284-5000 FAX: (215) 662-5501 E-MAIL: info@msche.org</p>	<p><b>Western Association of Schools and Colleges, Accrediting Commission for Senior Colleges and Universities</b> Ralph Wolff, President and Executive Director 985 Atlantic Ave., Ste. 100 Alameda, CA 94501 (510) 748-9001 FAX: (510) 748-9797 E-MAIL: wascsr@wascsenior.org</p>

Access [www.ed.gov/admins/finaid/accred/accreditation\\_pg7.html#RegionalInstitutional](http://www.ed.gov/admins/finaid/accred/accreditation_pg7.html#RegionalInstitutional) for a complete list. A letter on accrediting agency letterhead must be submitted that specifies the name of the school you are submitting for your employment requirement. If you have questions about employment at a facility outside the United States, please contact NBPTS at 1-800-22TEACH.

# Candidate License Verification Form

To complete this form, be sure to do the following:

- Provide the correct information as instructed on the form.
- Sign on the signature line.
- Apply a bar code label.
- Attach a copy of your teaching or school counseling license(s).
- Submit the form in the provided 6" x 9" envelope.

If you are verifying employment at one or more facilities that did not require you to hold a state teaching license, see the instructions below for the Candidate Workplace Verification Form. Candidates for ECYA/School Counseling must have held a valid state school counseling license during the years of employment verified.

# Candidate Workplace Verification Form

If you were not required to hold a teaching license by your state, or if your employer is an institution outside the United States, you must provide a completed Candidate Workplace Verification Form. To complete this form, be sure to do the following:

- Fill in all information above the Personnel Office box.
- Sign on the signature line.
- Apply a bar code label.

## USING OTHER MATERIALS INCLUDED IN THE MAILING

### Candidate Bar Code Labels

The bar code labels provided with your portfolio kit display your candidate ID number assigned at the time of your application. All information about your candidacy is included in your candidate record at NBPTS, using this number. Apply one of these bar code labels where indicated on each required verification form you submit so that NBPTS can verify that you have provided the necessary forms to continue with your candidacy. If you do not have bar code labels, please write your candidate ID number on a blank label and place on the verification form where indicated.

### Return Envelope to NBPTS Processing Center

Your Eligibility Verification packet includes a 6" × 9" envelope addressed to the NBPTS Processing Center, 11827 Tech Com, Suite 200, San Antonio, TX 78233. Use this envelope to return the Candidate License Verification Form. Do not use this envelope to return fee payment to NBPTS.

If an institution to which you supply any other verification form does not follow the instructions on that form but returns it directly to you, you can use this envelope to return it as well. However, do not wait for institutions to submit completed forms before sending the Candidate License Verification Form, as doing so could delay processing.

### Withdrawal Form

Use this form if you decide to withdraw entirely from the National Board Certification process. For more information, refer to the instructions included with the Withdrawal Form. Mail the Withdrawal Form to:

**NBPTS PROCESSING CENTER  
11827 TECH COM, SUITE 200  
SAN ANTONIO, TX 78233**

Please note that your eligibility will expire if you do not complete at least one portfolio entry by the published date or one assessment center exercise prior to **June 15, 2010**. You would then need to begin the application process anew by reapplying for candidacy and paying the full assessment fee. If a third party is paying all or some of your assessment fee, you should contact that third-party payer in advance of the deadline to withdraw.





APPLY BAR CODE LABEL HERE  
 If you do not have bar code labels, you may write your candidate ID number on a blank label and place here.

## CANDIDATE ELIGIBILITY VERIFICATION FORM

This **combined** form is for use **ONLY** by candidates who (1) have worked for at least three years (or the equivalent) at the same state-supported school district, (2) are required to hold at least a bachelor's degree (or its equivalent) for employment at this school, and (3) are required to hold a state teaching license and held a valid state teaching license for the three years of employment (or school counseling license for candidates who applied for the ECYA/School Counseling certificate) at this school. (Employment under an intern or similar license is not acceptable for candidacy.) **Candidates must meet the three requirements listed above. Candidates who do not meet all three requirements are not eligible to use this form and must complete and submit the individual forms. Candidates working at a facility that does not require a teaching or school counseling license cannot use this form. All forms are due at the National Board for Professional Teaching Standards® (NBPTS®) no later than January 31, 2010.**

**Candidate:** Apply a bar code label, complete the top part of the form, and **attach a copy of your current, valid state teaching license** (or current, valid state school counseling license if you applied for the ECYA/School Counseling certificate). Then give the form to your employer to complete and submit. If you worked at more than one school in the same state-supported school district, this form must be signed by a District Employment Officer.

Principal/District Employment Officer \_\_\_\_\_  
 District \_\_\_\_\_  
 School(s) \_\_\_\_\_  
 School Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

By my signature, I hereby authorize NBPTS or their designated representative to verify the information provided on this form. I further authorize my employer to release my employment information to NBPTS for this purpose and hereby release them from any liability related to the issuance of this information. I affirm to NBPTS that (1) my current employment is at a state-supported school; (2) I have earned at least a bachelor's degree from an accredited institution; and (3) I hold a current, valid state teaching license/certificate (school counseling license if I applied for the ECYA/School Counseling certificate). I also represent that the information on this form is true, and I understand that if I misrepresent or falsify information on this form, National Board Certification® shall be denied or, if granted, revoked.

\_\_\_\_\_  
*Signature* \_\_\_\_\_  
*Date You Applied for Candidacy*

\_\_\_\_\_  
*Full Name (Print)* \_\_\_\_\_  
*Maiden Name* \_\_\_\_\_  
*Social Security Number*

**School Administrator/Principal OR District Employment Officer:** Check the box with the correct answer for each question, providing additional information where indicated. If answering "Yes" to all three questions, submit the form to the address below as soon as possible, but no later than **January 31, 2010**.

1. Is your facility an early childhood, elementary, middle, or secondary school facility?  
 **Yes**  
 **No** **Stop.** Return this form to the candidate. He/she is ineligible for National Board Certification.
2. Has the candidate been employed at your facility for at least three years or the equivalent? See reverse.  
 **Yes**  
 **No** **Stop.** Return this form to the candidate. He/she is not eligible to complete this form.
3. Has the candidate held a current, valid state teaching license/certificate during the years employed at your facility (school counseling license if an ECYA/School Counseling candidate)? (Employment under an intern or a similar license is not acceptable for candidacy.)  
 **Yes** **License Number:** \_\_\_\_\_ **Date Issued:** \_\_\_\_\_ **Exp Date:** \_\_\_\_\_  
 **No** **Stop.** Return this form to the candidate. He/she is ineligible for National Board Certification.

\_\_\_\_\_  
*Signature* \_\_\_\_\_  
*Date* \_\_\_\_\_  
*Phone*

\_\_\_\_\_  
*Name (Print)* \_\_\_\_\_  
*Title*

Use the 6" x 9" return envelope to submit the completed form, along with a **copy of your current teaching license** and a copy of any other teaching licenses you have held for the three years of employment, to the **NBPTS PROCESSING CENTER, 11827 TECH COM, SUITE 200, SAN ANTONIO, TX 78233**, to be received no later than **JANUARY 31, 2010**.

## INSTRUCTIONS FOR QUESTION 2

Candidates for National Board Certification (1) are required to submit verification of three years (or the equivalent) of successful teaching (or three years successfully serving as a school counselor if the candidate applied for the ECYA/School Counseling certificate) at one or more early childhood, elementary, middle, or secondary school facilities either located within the United States or at an institution accredited by one of the agencies recognized by the U.S. Secretary of Education, and (2) must have held the appropriate permanent license/credential during those three years. Time spent in administrative positions, teaching or school counseling at the postsecondary level (community college or university/college), in student teaching or teaching internships (or student practica or school counseling internships), teaching under an intern license, and/or as a teacher's assistant does not count toward the requirement.

Candidates for certificate areas other than ECYA/School Counseling who have taught part time are eligible, provided that they have employment that is the equivalent of three years of teaching. Substitute teachers may count teaching time spent in long-term assignments toward the three years; substitute teaching that consists of short-term or on-call assignments does not accrue toward the three years. The three years of employment must have been completed prior to the candidate's application date as recorded on the front of this form and must have been done under a valid teaching license. Successful teaching means the candidate did not have his/her teaching license suspended or revoked during the period of employment being verified.

Candidates for ECYA/School Counseling who have served as a school counselor part time are eligible, provided that they have school counseling employment that is the equivalent of three years of full-time school counseling. The three years of employment must have been completed prior to the candidate's application date as recorded on the front of this form. Successful service as a school counselor means that the candidate did not have his/her school counseling license suspended or revoked during the period of employment being verified.

If the candidate has three years of full-time teaching or school counseling experience as defined above at your facility prior to his or her application date, fill in "Yes" on Question 2. Otherwise, use the matrix below to identify the correct response (rounded to the nearest half-year).

Employment Status	Years of Employment	Response to Question 2
Full time, partly nonteaching or noncounseling	Multiply the number of years of employment at your facility/district prior to the candidate's application date by the percentage of time spent teaching or school counseling (for example, 6 years $\times$ 50% teaching = 3 years of full-time equivalent teaching employment).	<p>Check "Yes" if your calculations result in three years of full-time equivalent teaching or school counseling employment as defined above. Be certain that your calculations only include time employed under a valid teaching or school counseling license.</p> <p>Check "No" if your calculations result in less than three years of full-time equivalent teaching or school counseling employment as defined above.</p>
Part time	Multiply the number of years of employment prior to the candidate's application date by the percentage of time the candidate is employed (for example, 4 years $\times$ 75% school counseling = 3 years of full-time equivalent school counseling employment).	
Long-term substitute	Add up the length of the long-term teaching assignments completed at your facility/district prior to the candidate's application date.	

If you have questions about how to complete this form, call 1-800-22TEACH®.



67204021



67204045



0307



67204038



APPLY BAR CODE LABEL HERE
If you do not have bar code labels, you may write your candidate ID number on a blank label and place here.

CANDIDATE EDUCATION VERIFICATION FORM

Candidate: Apply a bar code label, complete the top part of this form, and give the form to the educational institution that conferred your bachelor's, master's, or doctoral degree (or its equivalent) for that institution to complete and submit.

University/College \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

By my signature, I hereby authorize the National Board for Professional Teaching Standards® (NBPTS®) or their designated representative to verify information regarding my educational background as indicated on my application. I further authorize the above-indicated institution to release my educational background information to NBPTS for this purpose and hereby release them from any liability related to the issuance of this information. I also represent that the information on this form is true, and I understand that if I misrepresent or falsify information on this form, National Board Certification® shall be denied or, if granted, revoked.

Signature \_\_\_\_\_

Name (Print) \_\_\_\_\_

Previous Last/Maiden Name \_\_\_\_\_

Years of Attendance \_\_\_\_\_

Date You Applied for Candidacy \_\_\_\_\_

Social Security Number \_\_\_\_\_

Year of Graduation \_\_\_\_\_

Degree \_\_\_\_\_

Educational Institution Officer: If you are able to verify the following information regarding the candidate, complete the form and submit it to the address below as soon as possible, but no later than January 31, 2010.

Degree Type (circle one): Bachelor's Master's Doctoral Year Granted \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Use the 6" x 9" return envelope to submit the completed form to the NBPTS PROCESSING CENTER, 11827 TECH COM, SUITE 200, SAN ANTONIO, TX 78233, to be received no later than JANUARY 31, 2010.



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APPLY BAR CODE LABEL HERE  
 If you do not have bar code labels, you may write your candidate ID number on a blank label and place here.

## CANDIDATE EMPLOYMENT VERIFICATION FORM

**Candidate:** Apply a bar code label, complete the top part of this form, and give the form to your employer to complete and submit. (You may reproduce this form as needed to send to multiple employers. For every employer that is an institution outside the United States, you will also need to provide a Candidate Workplace Verification Form.) If you worked at more than one school in the same state-supported school district, this form must be signed by a District Employment Officer.

Principal/District Employment Officer \_\_\_\_\_

District \_\_\_\_\_

School Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

By my signature, I hereby authorize the National Board for Professional Teaching Standards® (NBPTS®) or their designated representative to verify information regarding my employment background as indicated on my application. I further authorize the above-indicated employer to release my employment information to NBPTS for this purpose and hereby release them from any liability related to the issuance of this information. I also represent that the information on this form is true, and I understand that if I misrepresent or falsify information on this form, National Board Certification® shall be denied or, if granted, revoked.

Signature \_\_\_\_\_

Date You Applied for Candidacy \_\_\_\_\_

Full Name (Print) \_\_\_\_\_

Maiden Name \_\_\_\_\_

Social Security Number \_\_\_\_\_

**School Administrator/Principal OR District Employment Officer:** Fill in the box of the correct answer to each question. Then complete the form and submit it to the address below as soon as possible, but no later than **January 31, 2010**.

1. Is this facility an early childhood, elementary, middle, or secondary school?  
 **Yes**  
 **No** (Return this form to the candidate. He/she is not eligible for National Board Certification.)

2. Has the candidate been employed at your facility for at least three years as a full-time teacher (or three years as a school counselor if the candidate applied for the ECYA/School Counseling certificate) under a valid state teaching license prior to the candidate's application date as recorded on this form?  
 **Yes**  
 **No**

3. Using the chart on the back of this form as a guide, fill in the box below that corresponds to the length of full-time teaching or school counseling employment (or its equivalent) under a valid state teaching license at your school prior to the date (see above) the candidate applied for candidacy.

<input type="checkbox"/> 0.5 Year	<input type="checkbox"/> 1.5 Years	<input type="checkbox"/> 2.5 Years
0055	0154	0253
<input type="checkbox"/> 1.0 Year	<input type="checkbox"/> 2.0 Years	<input type="checkbox"/> 3.0+ Years
0109	0208	0307

Signature \_\_\_\_\_

Date \_\_\_\_\_

Title \_\_\_\_\_

( ) \_\_\_\_\_  
 Phone \_\_\_\_\_

Use the 6" x 9" return envelope to submit the completed form to the **NBPTS PROCESSING CENTER, 11827 TECH COM, SUITE 200, SAN ANTONIO, TX 78233**, to be received no later than **JANUARY 31, 2010**.

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## INSTRUCTIONS FOR QUESTION 3

Candidates for National Board Certification (1) are required to submit verification of three years (or the equivalent) of successful teaching (or three years successfully serving as a school counselor if the candidate applied for the ECYA/School Counseling certificate) at one or more early childhood, elementary, middle, or secondary school facilities either located within the United States or at an institution accredited by one of the agencies recognized by the U.S. Secretary of Education and (2) must have held the appropriate valid license/credential during those three years. Time spent in administrative positions, teaching or school counseling at the postsecondary level, in student teaching or teaching internships (or student practica or school counseling internships), teaching under an intern or a similar license, and/or as a teacher's assistant does not count toward the requirement.

Candidates for certificates other than ECYA/School Counseling who have taught part time are eligible, provided that they have employment that is the equivalent of three years of teaching. Substitute teachers may count teaching time spent in long-term assignments toward the three years; substitute teaching that consisted of short-term or on-call assignments does not accrue toward the three years. The three years of employment must have been completed prior to the candidate's application date as recorded on the front of this form and must have been done under a valid teaching license. Successful teaching means the candidate did not have his/her teaching license suspended or revoked during the period of employment being verified.

Candidates for ECYA/School Counseling who have served as a school counselor part time are eligible, provided that they have school counseling employment that is the equivalent of three years of full-time school counseling. The three years of employment must have been completed prior to the candidate's application date as recorded on the front of this form. Successful service as a school counselor means the candidate did not have his/her school counseling license suspended or revoked during the period of employment being verified.

Use the matrix below to determine the proper box to fill in on Question 3.

<b>Employment Status</b>	<b>Years of Employment</b> (Be certain that your calculations only include time employed under a valid teaching or school counseling license.)
Full time	Determine the number of years of employment at your facility prior to the candidate's application date, rounded to the closest half-year.
Full time, partly nonteaching or noncounseling	Multiply the number of years of employment prior to the candidate's application date by the percentage of time spent teaching or school counseling (for example, 6 years $\times$ 50% teaching = 3 years of full-time equivalent teaching employment).
Part time	Multiply the number of years of employment prior to the candidate's application date by the percentage of time the candidate is employed (for example, 4 years $\times$ 75% school counseling = 3 years of full-time equivalent school counseling employment).
Long-term substitute	Add up the length of the long-term teaching assignments completed at your facility prior to the candidate's application date.

If you have questions about how to complete this form, call 1-800-22TEACH@.



APPLY BAR CODE LABEL HERE  
If you do not have bar code labels, you may write your candidate ID number on a blank label and place here.

## CANDIDATE LICENSE VERIFICATION FORM

**Candidate:** Apply a bar code label, check the box with the correct answer to Question 1, and follow the instructions to complete the form.

1. Did you hold a valid teaching license/certificate (or school counseling license if applying for the ECYA/School Counseling certificate) for the three years of employment indicated on your Candidate Employment Verification Form(s)? Employment under an intern or a similar license does not count toward the three-year requirement.
  - Yes** (Skip Question 2. Complete the rest of the form and **submit a copy of your current teaching or school counseling license with this form.**) If more than one license was held for the three years of employment indicated on your Candidate Employment Verification Form(s), submit copies of all that were applicable.
  - No** (Go to Question 2. Candidates for all certificate areas except the ECYA/School Counseling certificate should complete the rest of the form and submit it. You will also need to submit the Candidate Workplace Verification Form to document that you were not required to hold a valid state license for all or part of the employment you are verifying. School counselors who applied for the ECYA/School Counseling certificate but do not meet the licensure requirements established by their state for a "school counselor" are not eligible for candidacy.)
2. A valid teaching license/certificate was not required by my place of employment for the following reason(s):
  - Early childhood/pre-K facility
  - Private school
  - School outside the United States
  - Other \_\_\_\_\_

By my signature, I affirm that the information on this form is true and I understand that if I misrepresent or falsify information on this form, National Board Certification® shall be denied or, if granted, revoked; that my attached license was valid for the three years of employment listed on my Candidate Employment Verification Form; and that the copy of my teaching or school counseling license attached to this form is a true copy of the original and has not been altered in any way.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Name (Print)*

\_\_\_\_\_  
*Social Security Number*

\_\_\_\_\_  
*Previous Last/Maiden Name*

\_\_\_\_\_  
*Dates Covered by License*

Attach a copy of your teaching license (if applicable) or school counseling license to this completed form and use the 6" x 9" return envelope to mail to the **NBPTS PROCESSING CENTER, 11827 TECH COM, SUITE 200, SAN ANTONIO, TX 78233**, to be received no later than **JANUARY 31, 2010**.



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APPLY BAR CODE LABEL HERE  
If you do not have bar code labels, you may write your candidate ID number on a blank label and place here.

## CANDIDATE WORKPLACE VERIFICATION FORM

**Candidate:** Use this form only if the facility in which you teach or taught during the past three years is a private school setting and you are not required to hold a teaching license, or if your employer is an institution outside the United States. Apply a bar code label, complete the top portion of the form, and give the form to your employer to complete and submit. (You may reproduce the form as needed to send to multiple employers.)

Name \_\_\_\_\_

School/Facility \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Personnel Office:** Check the box with the correct answer and follow the instructions. If answering "Yes," complete and sign the form and submit it to the address below as soon as possible, but no later than **January 31, 2010**.

Is your school/facility recognized and approved to operate by your state (or by one of the recognized regional accrediting agencies if it is an institution outside the United States)?

- Yes** Attach a copy of the appropriate state license or other official documentation from the state or agency granting permission to operate.
- No** Return this form to the candidate. He/she is ineligible for National Board Certification.

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Name (Print)*

(\_\_\_\_\_)\_\_\_\_\_  
*Phone*

\_\_\_\_\_  
*Title*

Use the 6" x 9" return envelope to submit the completed form to **NBPTS PROCESSING CENTER, 11827 TECH COM, SUITE 200, SAN ANTONIO, TX 78233**, to be received no later than **JANUARY 31, 2010**.



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