



SECONDARY OCCUPATIONAL SPECIALIST RENEWAL

IDAHO CTE EDUCATOR CERTIFICATION APPLICATION

Application Packet Important Information

This application is ONLY for those that are applying for a renewal of a five-year renewable secondary Occupational Specialist certificate. If you are applying for anything other than a renewal, please use the *Secondary Occupational Specialist Initial – Revision – Reinstatement Application*.

Please check that you have included the items below, as the application will be returned to you if they are missing.

Completed and signed application

Completed and signed Professional Development Plan (PDP). Confirm your intent to complete required professional development activities by completing a PDP (for initial certification) or an IPLP (for renewal certification) and obtaining the appropriate signatures.

Correct Application Fee – Fee is nonrefundable. Make check or money order payable to the State Department of Education (or SDE).

- \$75 Application Fee

Transcripts (if applicable) – To expedite processing, please include transcripts with your application.

- Unofficial transcripts may be sent in lieu of official transcripts

Completed attestations and signed last page of the application

For more detailed information, please see our website at

<https://cte.idaho.gov/educators-5/become-a-cte-educator/>

List of Idaho CTE Secondary Endorsements

By Certificate

LIMITED, STANDARD, OR ADVANCED OCCUPATIONAL SPECIALIST CERTIFICATES

AGRICULTURE, FOOD, AND NATURAL RESOURCES (AFNR)

- Agribusiness (6-12)
- Agricultural Leadership and Communications (6-12)
- Agricultural Mechanics and Power Systems (6-12)
- Animal Science (6-12)
- Certified Welding (6-12)
- Ecology and Natural Resource Management (6-12)
- Ornamental Horticulture (6-12)
- Plant and Soil (6-12)

BUSINESS AND MARKETING (BAM)

- Administrative Services (6-12)
- Applied Accounting (6-12)
- Business Digital Communications (6-12)
- Business Management (6-12)
- Hospitality Management (6-12)
- Marketing (6-12)

ENGINEERING AND TECHNOLOGY EDUCATION (ETE)

- Commercial Photography (6-12)
- Computer Support (6-12)
- Drafting and Design (6-12)
- Journalism (6-12)
- Graphic Design (6-12)
- Networking Support (6-12)
- Pre-Engineering (6-12)
- Programming & Software Technologies (6-12)
- Digital Media Production (6-12)
- Web Design and Development (6-12)

Work-Based Learning Coordinator (6-12)

FAMILY AND CONSUMER SCIENCES & HUMAN SERVICES (FCS&HS)

- Apparel/Textiles (6-12)
- Child Development & Services (6-12)
- Cosmetology (6-12)
- Culinary Arts (6-12)
- Food Science & Processing Technology (6-12)
- Hospitality Services (6-12)

HEALTH PROFESSIONS & PUBLIC SAFETY (HPPS)

- Dental Assisting (6-12)
- Emergency Medical Technician (6-12)
- Firefighting (6-12)
- Law Enforcement (6-12)
- Medical Assisting (6-12)
- Nursing Assistant (6-12)
- Pharmacy Technician (6-12)
- Rehabilitation Services (6-12)

TRADES & INDUSTRY (T&I)

- Automated Manufacturing (6-12)
- Automotive Collision Repair (6-12)
- Automotive Maintenance & Light Repair (6-12)
- Cabinetmaking & Bench Carpentry (6-12)
- Certified Welding (6-12)
- Construction Trades Technology (6-12)
- Electrical Technology (6-12)
- Electronics Technology (6-12)
- HVAC Technology (6-12)
- Heavy Equipment/Diesel Technology (6-12)
- Industrial Mechanics (6-12)
- Plumbing Technology (6-12)
- Precision Machining (6-12)
- Small Engine Repair/Power Sports (6-12)



**CTE SECONDARY OCCUPATIONAL SPECIALIST
RENEWAL**

IDAHO CTE EDUCATOR CERTIFICATION APPLICATION

THIS SECTION FOR OFFICIAL USE ONLY	Fee	Date Paid	Check #	Date Entered	Date Issued	Date Expired	BIC Status
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Section I: Personal Information

Full Legal Name		EDUID	
Maiden/Other Name		Birth Date	
Email Address		Male	Female
Home Street or PO Box #			
City, State, Zip Code		Phone	
Are you currently teaching or contracted to work in a career technical program? If so, what school and in what program?		Yes	No
School?		Program?	

Section II: Occupational Area and Endorsements

Check the occupational area(s) for which you are applying, then list the endorsements for which you are applying. If adding new endorsement(s), please list the endorsement(s) here and include transcripts, an updated resume, and any other forms to support the endorsement consideration. Please refer to the list of Idaho CTE endorsements on page 2. Note: If no changes to a current certificate are being requested, please write "SAME" next to Endorsement #1.

Occupational Area Check all at the right that apply	Agriculture, Food & Natural Resources	Health Professions & Public Safety
	Business Technology	Marketing Technology
	Engineering & Technology Education	Trades & Industry
	Family and Consumer Sciences & Human Services	Work-Based Learning Coordinator
		Career Technical Education Administrator

Endorsements List, at the right, the endorsements for which you are applying	# 1		# 4	
	# 2		# 5	
	# 3		# 6	

Section III: Professional Development – Six (6) Semester Credits

Renewal applicant must have earned at least six (6) semester credits during the validity period of the credential. Semester credits may be earned at the rate of one (1) transcribed credit = 15 hours of workshop/conference = 40 hours back-to-industry. Below, list only education institutions where transcribed credits were earned and include transcripts. All other professional development activities need to be documented using a *Professional Development Activities* form found at <https://cte.idaho.gov/educators-5/become-a-cte-educator/>.

Name of Course	College/University Name	Credits Earned	Date Completed
a.			
b.			
c.			
d.			
e.			

Section V: 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 license/certificate.

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| 1. Have you ever had an educator or teacher license/certificate 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 questions marked yes. You do not need to re-submit a written explanation if you have previously provided one.

Section VI: 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.

By signing this application 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.
 - Please obtain court records from the court house.
 - A printout from the State Judiciary Repository will NOT be accepted as relevant court documents.
- **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.

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

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

Section VII: Attestations and Signature

For us to be able to process your application, **please review and initial each of the statements below.**

_____ I attest and affirm that I have read the Code of Ethics for Idaho Professional Educators (for a copy, 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 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 always updated with the IDCTE. Failure to do so may result in not receiving legal/licensing documents or communications related to my credential.

Do not sign until you have read and initialed the above statements.

Signature of Applicant:

Date:

Return application packet and fee(s) in one packet to:

State Department of Education
ATTN: Educator Certification
P.O. Box 83720
Boise, ID 83720-0027

You will be mailed two copies of your certificate upon application approval.

THIS SECTION FOR OFFICIAL USE ONLY

Applicant Name:	
Date of Birth:	EDUID:
CERTIFICATION RECOMMENDATION Certificate:	
Endorsements:	
Dates Valid:	Approved Date:
Authorization Signature:	