

APPLICATION FOR CAREER AND TECHNICAL EDUCATION LICENSE

Agricultural Education

APPLICANTS MUST COMPLETE A BACKGROUND CHECK PRIOR TO SUBMITTING THIS APPLICATION

Last Name	First Name	Middle Name	Date	SS # or CACTUS ID #
Home Address			City	State
			Zip	Birth Date
E-mail Address			Work Phone	Home Phone

I am currently teaching at: (School) _____ (District) _____ Not Teaching

Is your background check complete: Yes No (Do NOT submit application until background check is complete)

I have attached the **\$50.00** license and endorsement fee.

Agriculture Endorsement(s) For Which You Are Applying:

- | | | |
|---|---|--|
| <input type="checkbox"/> Agricultural Business & Management | <input type="checkbox"/> Animal Science & Technology | <input type="checkbox"/> Plant/Soil Science and Technology |
| <input type="checkbox"/> Agricultural Mechanization | <input type="checkbox"/> Natural Resources Management | |
| <input type="checkbox"/> Agriculture Science (Career & Technical) | <input type="checkbox"/> Ornamental Horticulture | |

Employment Record (Related to the endorsement area(s) for which you are applying – *(Exclude teaching experience)*)

From		To		Total Months	Company Name & Address	Position & Title	Immediate Supervisor (Name & Title)	Verification Attached
Mo	Yr	Mo	Yr					
								<input type="checkbox"/> Yes <input type="checkbox"/> No

Explain Duties & Responsibilities:

From		To		Total Months	Company Name & Address	Position & Title	Immediate Supervisor (Name & Title)	Verification Attached
Mo	Yr	Mo	Yr					
								<input type="checkbox"/> Yes <input type="checkbox"/> No

Explain Duties & Responsibilities:

From		To		Total Months	Company Name & Address	Position & Title	Immediate Supervisor (Name & Title)	Verification Attached
Mo	Yr	Mo	Yr					
								<input type="checkbox"/> Yes <input type="checkbox"/> No

Explain Duties & Responsibilities:

Employer verification must be submitted with this application to verify work experience.

Education **Original Transcripts** must be attached to verify degree and/or applicable endorsement coursework.
If additional space is needed, please attach a separate sheet of paper

Name of School	From		To		Graduation Year	Degree	Major/Minor/Composite
	Mo	Yr	Mo	Yr			

Teaching Experience If additional space is required, please attach a separate sheet of paper.

Name of School	Address	From		To		Subjects	Principal/Director
		Mo	Yr	Mo	Yr		

References Teaching and/or Employment

Name	Address	Position	Phone

Applicant Signature	X	Date	
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----- **Information below to be completed by USOE personnel** -----

License Recommended:	<input type="checkbox"/> Level 1 CTE/APP <input type="checkbox"/> Level 1 CTE <input type="checkbox"/> ARL-Alternative Route to Licensing
Approved Endorsement:	
Approved Endorsement:	
Approved Endorsement:	
Signature of State Agricultural Education Specialist	
Signature	Date

Submit completed application, official transcripts, fees*, and employment verification to:
Stephanie Ferris, USOE Educator Quality and Licensing, 250 East 500 South, PO Box 144200, Salt Lake City, UT 84114-4200, Phone: (801) 538-7752

***\$50.00 License and Endorsement Fee**