

APPLICATION FOR ENDORSEMENT OR ENDORSEMENT PLAN (SAEP)

Network+ Endorsement

**This endorsement only attaches to Secondary Licenses, CTE Licenses or CTE/APP Licenses
Documentation must be attached to verify applicable course work and requirements**

Last Name	First Name	Middle Name	Date	CACTUS ID #
Home Address			City	State
Email Address			Zip	Work Phone
				Home Phone
Current Teaching/License Status				
<input type="checkbox"/> Not Teaching OR Teaching at: (School) _____ (District) _____				
Educator License(s) held: <input type="checkbox"/> Elementary Education <input type="checkbox"/> Secondary Education <input type="checkbox"/> Career & Technical <input type="checkbox"/> CTE/APP				
Background check: <input type="checkbox"/> Yes <input type="checkbox"/> No (Do NOT submit application until background check is complete)				
Check one	<input type="checkbox"/> I am requesting the Network+ endorsement. All course work and requirements have been completed and the appropriate documentation is attached. An evaluation fee of \$45.00 is enclosed.			
	<input type="checkbox"/> I am submitting a State Approved Endorsement Plan (SAEP) for the Network+ endorsement. Course work and requirements will be completed within the timeframe identified in the plan (one year). An evaluation fee of \$45.00 is enclosed.			

This endorsement authorizes the instructor to teach the following approved Information Technology courses:
Network+

Course Work			
Required	Verification of 40 hours of a Network+ workshop, 3.0 credits for a Network+ class, or 2 years of networking work experience. (minimum requirement for SAEP)		Date Completed
	Verification of or plan for a passing score on the CompTIA Network+ exam.	Date to be Completed	Date Completed
	Portfolio of one original unit of instruction that could be used in teaching a Network+ class (include: standards and objectives, presentations, handouts, activities, labs, rubrics, quizzes, tests, projects, etc.)	Date to be Completed	Date Completed

Signature of Applicant	Date
X	
Submit completed application and official transcripts or other documentation to: Stephanie Ferris, USOE Educator Licensing, 250 East 500 South, PO Box 144200, Salt Lake City, UT 84114-4200, Phone: (801) 538-7752 \$45.00 Endorsement Fee or \$45.00 SAEP fee must be included with this application	

----- **Information below to be completed by USOE personnel** -----

Endorsement Recommended	Network+	SAEP Approved for one year
		CTE Specialist Signature _____ Date _____
		Endorsement Awarded
		CTE Specialist Signature _____ Date _____