



**TENNESSEE DEPARTMENT OF EDUCATION
OFFICE OF EDUCATOR LICENSING**

12TH FLOOR ANDREW JOHNSON TOWER 710 JAMES ROBERTSON PKWY NASHVILLE TN 37243

PRINT CLEARLY - Please use Black Ink to ensure scanned application is legible - provide full name - include any aliases					
United States SSN - required	First Name	Middle Name	Last Name	Maiden Name/other last name aliases	
Date of Birth-required	Gender	Street/P.O. Box	City	State	Zip Code
Telephone Number - include area code	E-mail address - Must provide to receive notification of license issuance			Cell Phone Number/Alternate Phone Number	

INFORMATION NEEDED FOR FEDERAL REPORTING - COMPLETE BOTH ETHNICITY & RACE

1. Ethnicity - Choose one Hispanic or Latino _____ Not Hispanic or Latino _____

2. Race - Choose one or more American Indian or Alaska Native _____ Asian _____ Black or African American _____
Native Hawaiian - Other Pacific Islander _____ White _____

PLEASE READ CAREFULLY BEFORE SIGNING - MUST BE COMPLETED

Personal Affirmation: Failure to complete this section will result in your application being returned without processing. False statements made in this application may constitute grounds to take action, revoke or deny a license. Check the appropriate block for each question.

1. Have you been convicted of a felony, including conviction on a plea of guilty, a plea of nolo contendere or order granting pre-trial diversion? _____ YES _____ NO

2. Have you been convicted of the illegal possession of drugs, including conviction on a plea of guilty, a plea of nolo contendere or an order granting pre-trial diversion? _____ YES _____ NO

3. Have you had a teacher's certificate/license revoked, suspended or denied, or have you voluntarily relinquished a certificate/license (allowing a license expire does not apply) _____ YES _____ NO

4. Is there any action pending against your certificate/license or application in another state? _____ YES _____ NO

If you have answered "yes" to questions 1 or 2, please attach details of conviction, including date and place of conviction, and court certified copies of the judgment, conviction, and sentencing.

If you have answered "yes" to questions 3 or 4, attach details naming the state and/or issuing authority and explain circumstance.

Signature _____ Date _____

TRANSACTION (S) REQUESTED. (Check and complete following page(s) if applicable)

CHOOSE TYPE OF INITIAL TENNESSEE LICENSE DESIRED

(THIS SECTION ONLY APPLIES TO THOSE WHO HAVE NEVER HELD A TENNESSEE LICENSE OR DESIRING ADDITIONAL LICENSE TYPE)

____ INITIAL LICENSE-TN Institutions Only (Apprentice, Apprentice Special Group, Beginning Administrator, or Instructional Leader) circle one

____ OUT OF STATE LICENSE (Program completers outside of TN / USA or applying based upon interstate agreement)

____ NON-PUBLIC SCHOOL LICENSE (Employment verification required)

____ TRANSITIONAL LICENSE (Requires signature from TN Director of Schools and verification from approved institution/agency)

____ INTERIM "B" LICENSE (Requires signature from Director of Schools, and verification from Dean of Education/Certification Officer at teacher preparation institution)

____ INTERIM "D" LICENSE (Internship) (Requires signature of Dean of Education at teacher preparation institution)

____ OCCUPATIONAL EDUCATION LICENSE (Apprentice Occupational)

____ PERMIT (This is not a Tennessee teaching license and can only be applied for by a Tennessee Public School System)

____ 3 YEAR INTERNATIONAL CREDENTIAL (Requires signature from Director of Schools, nonrenewable)

____ JROTC LICENSE (Requires signature from TN Director of Schools)

____ SPEECH/LANGUAGE PATHOLOGIST OR SPEECH/LANGUAGE TEACHER OR SCHOOL AUDIOLOGIST

____ NATIONAL BOARD CERTIFICATION

ADVANCEMENT TO APPRENTICE LEVEL OR PROFESSIONAL LEVEL LICENSE

ONLY APPLICABLE IF HELD A PREDECESSOR TENNESSEE LICENSE

____ ADVANCEMENT FROM APPRENTICE LEVEL TO PROFESSIONAL LEVEL (Professional, or Professional School Service Personnel) circle one

____ ADVANCEMENT FROM ALTERNATIVE "A" or ALTERNATIVE "C" OR ALTERNATIVE "E" TO APPRENTICE LEVEL (Apprentice or Out of State) circle one

____ ADVANCEMENT FROM INTERIM "B" TO APPRENTICE LEVEL (Apprentice or Out of State) circle one

____ ADVANCEMENT FROM INTERIM "D" TO APPRENTICE LEVEL

____ ADVANCEMENT FROM ALTERNATIVE "I" OR ALTERNATIVE "II" (Apprentice or Out of State or Professional) circle one

____ ADVANCEMENT FROM TRANSITIONAL (Interim B, Apprentice or Professional) circle one

____ ADVANCEMENT FROM APPRENTICE OCCUPATIONAL TO PROFESSIONAL OCCUPATIONAL LICENSE

____ CONVERSION FROM TENNESSEE TEACHING LICENSE TO SCHOOL SERVICE PERSONNEL LICENSE (Speech/Language only)

____ ADVANCEMENT TO PROFESSIONAL LEVEL ADMINISTRATOR LICENSE

RENEWAL OF OR AMENDMENT TO AN EXISTING LICENSE

ONLY APPLICABLE IF AMENDING AN EXISTING TENNESSEE LICENSE

____ RENEWAL OF LICENSE (Check one)

____ 5 Year License (Apprentice/Apprentice Special Group/Out of State) _____ JROTC _____ 10 Year License (Professional/Professional Special Group)

____ Administrator License (Beginning/Professional) _____ 5 Year Apprentice Occupational License _____ 10 Year Professional Occupational License

____ Alternative A (Speech Lang. only) _____ Interim B _____ Interim D _____ Transitional _____ National Board Certification

____ AMENDMENT TO ADD ADDITIONAL DEGREE TO TEACHING LICENSE (Check one of the following and attach official transcripts)

____ Masters Degree _____ Master's Degree +30 semester graduate hours _____ Education Specialist _____ Doctorate Degree

____ AMENDMENT TO ADD ENDORSEMENT AREA (S) TO TEACHING LICENSE (Identify area to be added) _____

____ NAME CHANGE (Requires a notarized copy of the marriage license, divorce decree, or court order that has generated the legal name change) Social Security card n/a

____ ADDRESS CHANGE NOTIFICATION

APPLICATION FOR SCHOOL ADMINISTRATOR & INSTRUCTIONAL LEADER LICENSES

Please note: ALL DOCUMENTS SUBMITTED TO THE OFFICE OF EDUCATOR LICENSING AND THE TENNESSEE ACADEMY FOR SCHOOL LEADERS BECOME THE PROPERTY OF THE TENNESSEE DEPARTMENT OF EDUCATION AND WILL NOT BE RETURNED TO THE APPLICANT NOR WILL THE DEPARTMENT PROVIDE COPIES OF DOCUMENTS TO THE APPLICANT OR THIRD PARTIES. INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPROPRIATE ENTITY.

APPLICANT NAME _____

LICENSE NUMBER (if applicable) _____

Section 1 - Initial Licensure

TASL Registration - Only complete this section if employed or if employment has been secured as an assistant principal, principal, or instructional supervisor in Tennessee.										
Provide information below to register for the Tennessee Academy for School Leaders. <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border-bottom: 1px solid black; padding-bottom: 5px;">Employing School District/LEA</td> <td style="width: 50%; border-bottom: 1px solid black; padding-bottom: 5px;">Position</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding-bottom: 5px;">TN Director of Schools (Signature)</td> <td style="border-bottom: 1px solid black; padding-bottom: 5px;">TN Director of Schools (Print name)</td> <td style="border-bottom: 1px solid black; padding-bottom: 5px;">Date</td> </tr> <tr> <td colspan="3" style="border-bottom: 1px solid black; padding-bottom: 5px;">Name and Email Address of District Contact Person</td> </tr> </table>			Employing School District/LEA	Position	TN Director of Schools (Signature)	TN Director of Schools (Print name)	Date	Name and Email Address of District Contact Person		
Employing School District/LEA	Position									
TN Director of Schools (Signature)	TN Director of Schools (Print name)	Date								
Name and Email Address of District Contact Person										
TASL Office Use Only:										
TASL Director (or designee) Signature	Date									

Select the appropriate option, obtain required signatures, and submit documents as requested.

Option 1 – Initial Licensure – Select one option	
Option 1a is for candidates who have <u>completed or are enrolled in</u> an approved <u>Tennessee Instructional Leader Preparation Program</u>	
Option 1b is for candidates who have <u>completed a program</u> approved for administrator licensure <u>in a state other than Tennessee</u>	
Submit applications to: Office of Educator Licensing, Department of Education, 12 th Floor Andrew Johnson Tower, Nashville, TN 37243	

1a (3 Steps) – Candidates prepared in Tennessee

Step 1: Indicate license type (check one): _____ ILL-B _____ ILL-A (valid for assistant principal employment only)

Step 2: Obtain recommendation from approved preparation provider indicating all program requirements met (ILL-B) or currently enrolled in approved preparation program (ILL-A)

Note to recommending agency: By signing below, you are indicating that the above stated individual has met the currently approved expectations and requirements for a preparation program approved in Tennessee for licensure of instructional leaders/administrators (SBE Rule 0520-02-03). In addition, you certify, to the best of your knowledge, that the individual is at least 18 years of age and possesses good moral character (Tenn. Code Ann. § 49-5-101).

Educator Preparation Provider		
Dean of Education (Print name)	Dean of Education (Signature)	Date
Certification Officer (Print name)	Certification Officer (Signature)	Date
Email Address of Contact Person		

Step 3: Submit official transcripts for all universities and colleges attended to the TN Office of Educator Licensing

1b (5 Steps) – Candidates prepared in a state other than Tennessee

Step 1: Indicate license type (check one): _____ ILL-B _____ ILL-A (valid for assistant principal employment only)

Step 2: Demonstrate proof of completion of an approved out-of-state instructional leader preparation program. This may be achieved by one of the following:

- a) an out-of-state instructional leader/administrator license comparable to the ILL-B (valid, renewable and allows the individual to serve as a school principal), or
- b) a recommendation from an instructional leader/administrator preparation program approved in a state other than Tennessee for licensure of school principals.

Please check one box below and submit requested information

I have attached proof of a valid instructional leader/administrator license from a state other than Tennessee

OR

I have obtained the appropriate signatures and included information below certifying that I have completed all requirements for a preparation program approved for instructional leader/administrator licensure in a state other than Tennessee.

Note to recommending agency: By signing below, you are indicating that the above stated individual has met the currently approved expectations and requirements for a preparation program approved in a state other than Tennessee for licensure of instructional leaders/administrators (SBE Rule 0520-02-03). In addition, you certify, to the best of your knowledge, that the individual is at least 18 years of age and possesses good moral character (Tenn. Code Ann. § 49-5-101).

Educator Preparation Provider (Institution/Organization)

State Abbreviation

Regional Accrediting Agency

Preparation Program (Program Title)

Degree and Major (if applicable)

Program Completion Date

Title of Authorized Official (e.g. Director, Dean, or Certification Officer)

Name of Authorized Official

Email Address

Telephone Number

Signature of Authorized Official

Date

Step 3: Submit official transcripts for all universities and colleges attended to the TN Office of Educator Licensing

Step 4: Verify at least 3 years (minimum of 25 months) of qualifying full-time education working experience.

Select the method by which experience is verified (check one):

- A completed Experience Verification Form (provided on the Office of Educator Licensing website) is attached to this application.
- I have confirmed that the TN Office of Educator Licensing has 3 years of qualifying experience on file, as reported by a Tennessee public school district.

Step 5 (ILL-B only): Submit passing scores on the School Leader Licensure Assessment (Praxis SLLA exam).

Select the method by which scores have been submitted to the Office of Educator Licensing (check one):

- A Designated Institution Score Report has been submitted by my educator preparation provider.
- Scores have been sent from ETS to the TN Department of Education (SSN must be provided to ETS).

Section 2 - Licensure Renewal and Advancement

Option 2 – Renewal of License – Non-administrators (not currently employed as Tennessee assistant principal, principal or instructional supervisor)

Submit applications to: Office of Educator Licensing, Department of Education, 12th Floor Andrew Johnson Tower, Nashville, TN 37243

Check the license to be renewed: _____ PAL _____ ILL-B _____ ILL-P _____ ILL-E

Option 3 – Renewal (2 Steps) or Advancement (4 Steps) of License – Administrators (currently employed as Tennessee assistant principal, principal or instructional supervisor)**

Submit applications to: Tennessee Academy for School Leaders, Department of Education, 12th Floor Andrew Johnson Tower, Nashville, TN 37243

Step 1: Indicate licensure transaction

Renewal – Renewing (check one): _____ ILL-B _____ PAL _____ ILL-P _____ ILL-E

Advancement – Advancing to (check one): _____ PAL _____ ILL-P _____ ILL-E

Step 2 (renewal and advancement): Obtain Recommendation from the Director of Schools

Director of Schools Recommendation: Verification the administrator has met expectations on a state approved administrator evaluation model for at least the last two school years

TN Director of Schools (Signature)

TN Director of Schools (Print name)

Date

Step 3 (advancement only): Attach completed/signed Professional Learning Plan

Step 4 (advancement only): Select the method by which advancement requirements have been met (check one):

TASL Beginning Administrator Induction Academy Pathway

Academy requirements completed (check one): _____ Assistant Principal _____ Principal _____ Supervisor

Cohort Name

Year of Completion

University Partnership Pathway - Obtain signatures and provide information below:

Educator Preparation Provider

Dean of Education or Certification Officer (Print name)

Dean of Education or Certification Officer (Signature)

Date

Email Address of Contact Person

** Licensed School Administrators employed in an approved TN non-public school must provide an Experience Verification Form (provided on the Office of Educator Licensing website), evidence of successful evaluations, and/or professional learning plan based upon TILS completed with a TN-approved instructional leader preparation program.

TASL Office Use Only: TASL Credit Verification: _____ Initials (TASL Director or designee)

Professional Learning Plan completed (if applicable): _____

TASL Director Signature

Date