



**APPLICATION FOR CAREER AND TECHNICAL OR PROVISIONAL CAREER AND TECHNICAL EDUCATOR LICENSE**

**IMPORTANT:** Read instructions on back of this form before completing this application. Please print or type.

**Check (✓) one:**  Career and Technical Educator License (CTE)  Provisional Career and Technical Educator License (CTEP)

APPLICANT NAME (Last, First, Middle, Maiden)	SOCIAL SECURITY NUMBER OR IEIN	BIRTHDATE (mm/dd/yyyy)
ADDRESS (Street, City, State, Zip Code)	SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	E-MAIL
	TELEPHONE (Include Area Code) Home	TELEPHONE (Include Area Code) Work

I. DISTRICT NAME AND NUMBER OF EMPLOYING SCHOOL DISTRICT

II. SPECIFIC CAREER AND TECHNICAL EDUCATOR SUBJECT TO BE TAUGHT

III. ACADEMIC PREPARATION (Attach official transcripts.)

NAME OF INSTITUTION	DATES ATTENDED		MAJOR SUBJECT AREA	TOTAL CREDITS EARNED
	FROM Month/Year	TO Month/Year		

IV. EMPLOYMENT EXPERIENCE (Attach original letters of experience or, if self-employed, a notarized statement of experience.)

PLACE OF EMPLOYMENT	FROM Month/Year	TO Month/Year	SPECIFIC TYPE OF WORK	IF APPLICABLE, LICENSE HELD (TYPE AND NUMBER)

**I certify that the above information and statements are correct to the best of my knowledge.**

\_\_\_\_\_ Date \_\_\_\_\_ Original Signature of Applicant

*\*I certify that this license request is made at the direction of the Board of Education and is a matter of record in the official minutes of the Board. District signature is required for Provisional Career and Technical Educator Licensure. I further certify that no teacher with a Career and Technical Educator License or regular license is available and that actual circumstance and need necessitates the issuance of this Provisional Career and Technical Educator License.*

(Article 21-10 of the School Code of Illinois). \_\_\_\_\_ Date

**Transmitted by:** \_\_\_\_\_ Date \_\_\_\_\_ Original Signature of Superintendent or Board Secretary of Employing District  
 \_\_\_\_\_ Date \_\_\_\_\_ Original Signature of Regional Office of Education Superintendent

**ISBE USE ONLY**

Recommended: \_\_\_\_\_ Date \_\_\_\_\_ Signature of State Board Official  
 Not Recommended: \_\_\_\_\_ Date

## INSTRUCTIONS FOR APPLYING AND COMPLETING THIS APPLICATION

1. **IMPORTANT:** To be evaluated for either of these licenses, you must also apply online and pay the applicable fee through your Educator Licensure Information System (ELIS) account. You can access your ELIS account at <https://sec3.isbe.net/IWASNET/login.aspx>.
2. Please print or type the information requested, and sign in ink. Return this completed form to your Regional Office of Education along with all supporting documentation. (Contact information is in your telephone book under local or county government, or at <http://www.isbe.net/regionaloffices/pdf/roedirectory.pdf>.) Chicago residents should mail this form and supporting documents to the Illinois State Board of Education, Educator Licensure, 100 North First Street, Springfield, Illinois 62777-0001.

### A. Application (73-23)

1. **ONE COPY REQUIRED** – complete one copy of this form and submit it to the Regional Superintendent.
2. **SIGNATURES REQUIRED** – The following individuals must sign this form (73-23).
  - a) you, the applicant
  - b) the Superintendent or the Board Secretary of the employing district when the application is for the Provisional Career and Technical Educator licensure only
  - c) the Regional Superintendent when the application is for a Career and Technical Educator or Provisional Career and Technical Educator license
3. **THE FOLLOWING INSTRUCTIONS REFER TO THE NUMBERED CATEGORIES ON THE FORM.**
  - I. **Employing District** – this section must be completed by the local superintendent and shall state the legal title and number of same (if applicable).
  - II. **Proposed Title of License** – this section must be completed by the employing superintendent and state the specific title for the license requested. The title must correspond with the course to be taught, i.e. Health Care Aide, Auto-Body, Licensed Practical Nursing, Refrigeration and Air Conditioning, etc.
  - III. **Academic Preparation** – you must include official transcripts showing 60 semester hours of college credit if you are applying for the Career and Technical Educator License. The Provisional Career and Technical Educator License does not require college credit.
  - IV. **Employment Experience** – this section must indicate all employment directly related to the area of endorsement.

### B. LETTERS OF VERIFICATION OF EMPLOYMENT EXPERIENCE - all applications must include letters verifying experience from your current and/or previous employer(s) detailing the specific tasks you performed and the length of time you were employed for each position held. These letters of experience must be directly related to the area of the endorsement requested.

The work experience requirement is as follows:

- 1) Career and Technical Educator – 2,000 hours of work experience within the last 10 years
- 2) Provisional Career and Technical Educator – 8,000 hours of work experience within the last 10 years

### C. SELF-EMPLOYMENT – If you were self-employed, you must enclose a notarized statement detailing the experience as above.