



**APPLICATION FOR PROVISIONAL VOCATIONAL CERTIFICATE**

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

Check (✓) one:  Provision Vocational Certificate  \*Temporary Provisional Vocational Certificate

APPLICANT NAME (Last, Middle, First, Maiden)	SOCIAL SECURITY NUMBER	BIRTHDATE (mm/dd/yyyy)
ADDRESS (Street, City, State, Zip Code)	HOME TELEPHONE (Include Area Code)	WORK TELEPHONE (Include Area Code)
	E-MAIL	

I. DISTRICT NAME AND NUMBER OF EMPLOYING SCHOOL DISTRICT

II. SPECIFIC VOCATIONAL 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 a *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 certificate 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 temporary provisional vocational certificate. I further certify that no teacher with a provisional vocational certificate or regular certificate is available and that actual circumstance and need necessitates the issuance of this Temporary Provisional Vocational Certificate (Article 21-10 of the School Code of Illinois).

\_\_\_\_\_ Date

Transmitted by: \_\_\_\_\_ Date

\_\_\_\_\_ Original Signature of Superintendent of Employing District

\_\_\_\_\_ Date

\_\_\_\_\_ Original Signature of Regional Office of Education Superintendent

**ISBE USE ONLY**

Recommended: \_\_\_\_\_ Date

Not Recommended: \_\_\_\_\_ Date

\_\_\_\_\_ Signature of State Board Official

## INSTRUCTIONS FOR COMPLETING THIS APPLICATION

**Unless this form is properly completed, the processing of your application will be delayed. Carefully observe the directions below.**

1. **TWO COPIES REQUIRED** - complete two copies of this form and submit them to the Regional Superintendent.
2. **TWO COPIES OF "APPLICATION FOR CERTIFICATE"** - this form must also be accompanied by two "Application for Certificate" forms (ISBE 73-03). Follow the directions on those forms for their proper completion.
3. **SIGNATURES REQUIRED** - The following individuals **must** sign **both** this form **and** the "Application for Certificate" (ISBE 73-03)
  - (a) you, the applicant
  - (b) the Superintendent of the employing district when the application is for a temporary provision vocational certification only.
  - (c) the Regional Superintendent when the application is for a temporary provision vocational certification only.
4. **THE FOLLOWING INSTRUCTIONS REFER TO THE NUMBERED CATEGORIES ON THE OPPOSITE SIDE OF THIS 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 Certificate - this section must be completed by the employing superintendent and state the specific title for certificate 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 wish the Provisional Vocational Certificate. The Temporary Provisional Vocational Certificate requires no college credit.
  - (IV) Employment Experience - this section must indicate all employment **directly** related to the area of endorsement.
5. **LETTERS OF VERIFICATION OF EMPLOYMENT EXPERIENCE** - all applications must include letters of experience from your employer(s) detailing the specific tasks you performed while in his/her employ and the length of time you were in his/her employ. This experience must be **directly** related to the area of endorsement.

The work experience requirement is as follows:

  - (a) Provisional Vocational - 2,000 hours of work experience.
  - (b) Temporary Provisional Vocational - 8,000 hours of work experience.
6. **SELF-EMPLOYMENT** - If you were self-employed you must enclose a notarized statement detailing the experience as above.