

Oklahoma Department of Career and Technology Education
Technology Education/Trade and Industrial Education
1500 West Seventh Avenue
Stillwater, OK 74074-4364

Program Code

STATEMENT OF QUALIFICATIONS
(Application for Approval of Qualifications to initiate Certification Process)

- Instructions:** (Note: This is not an "Application for Certification" therefore a fee is not required at this time)
1. Complete entire form including all required signatures.
 2. Include at least 3 references, with complete name, address, and phone number, who can verify your trade area experience.
 3. List practical trade experience for at least three of the past five years.
 4. Submit a copy of your college transcripts, high school diploma, or certificate of high school equivalency.
 5. If applicable, submit a copy of trade certificate or license.
 6. Submit this application and supporting documentation to the address above.

Please print or type

PERSONAL DATA

Name _____ Social Security Number ____/____/____
Last First Middle

Present Address _____
Number Street City State Zip Code

Permanent Address _____
Number Street City State Zip Code

Home Phone (____) ____ - _____ Business Phone (____) ____ - _____

E-Mail Address _____ Are you willing to relocate? YES NO

TRADE EXPERIENCE REFERENCES

Give the names and **COMPLETE** mailing addresses of at least three persons qualified to verify your **TRADE** or **TECHNICAL** experience.

Name	Address	City	State	Zip Code	Phone #

I hereby authorize the Trade and Industrial Education Division of the Oklahoma Department of Career and Technology Education to send a form reference letter to each of the above named individuals for the purpose of ascertaining my trade experience.

Signature

_____/____/____
Date

EDUCATION

Complete information requested for each level of education	School name and location City and State	Dates Attended		Year Graduated	Type of Certificate, Diploma, Degree and Major
		From	To		
*GED					
*High School					
*College or University					
Military school(s), apprenticeship, or other trade or technical training programs					

***Attach copy of transcript(s), diploma, or GED certificate**

Please continue on a separate sheet of paper if you need additional space.

CURRENT TEACHER CERTIFICATE AND LICENSING

Do you presently hold any type of teaching or administrative certification in Oklahoma? Yes No

If yes, list type, number and expiration date of certificate:

Type _____ Number _____ Expiration Date ____ / ____ / ____

Type _____ Number _____ Expiration Date ____ / ____ / ____

Type _____ Number _____ Expiration Date ____ / ____ / ____

Are you licensed or certified by any trade or profession? Yes No

If yes, indicate the kind of license or certificate. _____

GENERAL INFORMATION

List any professional activities or other information that is pertinent. Please continue on a separate sheet of paper if you need additional space.

SUMMARY OF EMPLOYMENT EXPERIENCE

_____ 1. Total years experience in education (teaching, administration or supervision).

_____ 2. Total years experience in business, industry, or military service related to your area of specialization.

May we contact your present employer for references? Yes No

PRACTICAL TRADE EXPERIENCE

List each position held, beginning with your present or most recent position. Work back through previous positions and include military experience. Continue on a separate sheet of paper if necessary. (See “*NOTE” below)

Dates employed			Name and address of employer	Summary of work performed
From	Mo.	Yr.		
To:	Mo.	Yr.		
Job title:				
Supervisor:				
Reason for leaving:				
Dates employed			Name and address of employer	Summary of work performed
From	Mo.	Yr.		
To:	Mo.	Yr.		
Job title:				
Supervisor:				
Reason for leaving:				
Dates employed			Name and address of employer	Summary of work performed
From	Mo.	Yr.		
To:	Mo.	Yr.		
Job title:				
Supervisor:				
Reason for leaving:				
Dates employed			Name and address of employer	Summary of work performed
From	Mo.	Yr.		
To:	Mo.	Yr.		
Job title:				
Supervisor:				
Reason for leaving:				

*** NOTE:** SUPPLEMENTAL DOCUMENTATION - An itemized listing of additional work performed (include approximate hours), in addition to the above, that would demonstrate your preparation in your field. This could include projects, part-time work, schools attended, summer jobs, etc.

TRADE AND TECHNICAL QUALIFICATIONS

1.	Name of specific trade or industrial occupation for which you wish to apply. _____
2.	Why are you interested in the position indicated in item #1 above? _____ _____ _____
3.	Have you served a regular apprenticeship or formal learning period? <input type="checkbox"/> Yes <input type="checkbox"/> No. If yes, how many years? ____ a. If Yes, name and location of firm or school with which you served apprenticeship or formal learning period. _____ b. If Yes, how many years did you serve as a journeyman at the trade you desire to teach? _____
4.	Have you had any practical experience as a supervisor, foreman, or superintendent? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, a. Please explain. _____ _____ Number of years _____ b. How many people did you have under your supervision? _____

5.	If you are a member of a labor, manufacturing, technical, or other organization, please indicate the name. _____
6.	Are you willing to take a practical and technical examination in your specific trade or industrial occupation? <input type="checkbox"/> Yes <input type="checkbox"/> No
7.	Are you willing to form a SkillsUSA chapter in connection with your trade? <input type="checkbox"/> Yes <input type="checkbox"/> No
8.	Are you willing to support the professional organizations approved by the elected officers of the Trade and Industrial Education Association? <input type="checkbox"/> Yes <input type="checkbox"/> No
9.	Cooperative education coordinator applicants only: List experiences that could help you qualify _____ _____ _____

ASSURANCE STATEMENT

I hereby certify that I meet the admission requirements to a T & I degree-granting university (if unsure, contact Oklahoma State University, the University of Central Oklahoma or Southwestern Oklahoma State University).
I understand if I do not currently hold a T & I certificate, I must complete these requirements at a T & I degree-granting University.
I understand if I do not qualify for a Standard T & I Teaching Certificate in Oklahoma, I must be working toward completion of the requirements in my area of specialization.
I hereby certify that the information contained herein is correct and complete to the best of my knowledge and belief.

Signature Date

EQUAL EMPLOYMENT OPPORTUNITY POLICY

The Oklahoma Department of Career and Technology Education does not discriminate with regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of non-job related medical condition(s) or handicap(s). This policy is followed in the operation of its educational programs and activities, recruitment, admissions, and employment practices.

AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

FOR USE BY ADMINISTRATIVE PERSONNEL ONLY

Interviewed Yes No Date: ____/____/____ Time: _____ a.m. p.m.

Applicant: Approved Disapproved Conditions for approval: _____

Reasons for disapproval: _____

Signature Position Date