

Verification for Literacy, K-5 Endorsement Coursework and Exam Waivers

Arizona Department of Education – Certification Unit

General Information

This may be completed by an Arizona public school superintendent, personnel director, or principal to verify that a teacher meets the established criteria to qualify for a waiver of the Literacy, K-5 endorsement **coursework and exam** requirements.

Instructions for Literacy, K-5 Endorsement Applicants

Step 1: Confirm that you meet the following requirements:

- You hold a valid Arizona Alternative Teaching, International Teaching, Classroom-Based Standard Teaching, or Standard Professional teaching certificate in early childhood education, elementary education, middle grades education, or special education and a valid AZDPS IVP fingerprint clearance card; <u>and</u>
- ☐ You have provided instruction in English language arts instruction in a kindergarten through grade 5 classroom for three consecutive years <u>and</u> at least 90% of the above-named applicant's full academic year (FAY) students are proficient on the English language arts (ELA) portion of the statewide assessment over the last three consecutive academic years.
- **Step 2:** Complete Section A and forward this form to the Arizona superintendent, personnel director, or principal who can verify if you meet the requirements indicated under Section B on the next page.
- **Step 3:** If verification that you meet all requirements has been or will be sent to the Certification Unit, complete and submit the application and fee for the Literacy, K-5 endorsement.

<u>Instructions for Arizona public school superintendents, personnel directors, and principals</u> **Step 1:** If applicant meets the criteria, complete, sign, and date Section B on the next page of this form.

- Step 2: Scan and save the completed form as a PDF, PNG, or GIF.
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- Step 3: Forward the completed form directly to Certification@azed.gov.

**The completed verification form must be submitted directly by the school administrator to Certification@azed.gov. Forms that are submitted by the applicant will not be accepted. **



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Section A: To be completed by the certification applicant.				
First Name:	Last Name:			Educator ID # or Last 4 digits of SSN
Email:		Phone Nur	mber:	
Certification Applicants: Do not write or type below this line.				
Section B: To be completed by the appropriate Arizona public school administrator				
This section is to be completed by an Arizona public school superintendent, personnel director, or principal.				
Print/Type Name		Emai	Email	
Title		Phon	Phone Number	
Name of Arizona District or Charter School		Locat	Location of District or Charter School	
Name of Arizona Biothot of Ghartor Goldon		Local	lion of Dis	trict of charter concor
I certify the above-named applicant is a teacher who provides literacy instruction in kindergarten through grade five and has demonstrated through classroom observations and student achievement data across subgroups using evidence-based measures for at least three consecutive years that the teacher possesses the instructional knowledge and skills to:				
 i. Effectively teach foundational reading skills, phonological awareness, phonics, fluency, vocabulary, and comprehension; and ii. Implement reading instruction using high-quality instructional materials; and iii. Provide effective instruction and interventions for students with reading deficiencies, including students with characteristics of dyslexia. 				
-AND-				
I certify that at least 90% of the above- the English language arts (ELA) portion years.			• `	,
Signature of Arizona School Administr	rator		Date	

School administrators should email the completed form directly to $\underline{\textit{Certification@azed.gov}}\ .$