Admissions Checklist for Alternative Certification for CTE Licensure

This Admissions Checklist will assist you in your application packet preparation to ensure that you submit a complete application for the Alternative Certification for CTE Licensure program.

You must submit this Admissions Checklist along with your application and all supporting documentation by the stated deadlines in order for your application to be considered.

**Fall Admission:** May 15  
**Spring Admission:** August 15

Have you...

- [ ] Applied to Leeward Community College (or are a current UH System student)
- [ ] Completed the Application for Alternative Certification for CTE Licensure
- [ ] Met the program admission requirements (i.e. Bachelors degree OR Associates in CTE field + 3 years experience OR Associates not in CTE field + 5 years experience)
- [ ] Taken and passed your Praxis I (PPST) exams (for AA and AS majors only)
- [ ] Decided how you will meet the Content Knowledge requirement prior to your last semester at Leeward (i.e., Student Teaching—ED 295B)
- [ ] Submitted all required supporting documentation
  - [ ] Resume
  - [ ] TB/MMR Health Clearances
  - [ ] Official Transcripts (copies are ok as long as legible)
  - [ ] Copy of any industry licenses or proof of industry experience
  - [ ] Proof of passing scores on Praxis I (if applicable)

- [ ] YES! I have done it all and am ready to apply!

Submit your completed application packet to:

Leeward CC—Education Programs  
Attn: Alternative Certification for CTE Licensure Program  
96-045 Ala Ike, Room ED 210  
Pearl City, HI 96782

*Any Questions? Contact us at 455-0467. Mahalo!*
# Application for Alternative Certification for CTE Licensure

Print or type application form and submit with the Admissions Checklist and all supporting documentation to:

Leeward CC, Education Programs, Alternative Cert for CTE Licensure, 96-045 Ala Ike, Room ED-210, Pearl City, HI 96782.

All supporting documents must be submitted with the application form by designated deadline to be considered.

**Fall Admission Deadline: May 15**  **Spring Admission Deadline: August 15**

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<tr>
<th>Name:</th>
<th>SSN:</th>
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<tr>
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<td>(SSN info is required for Fingerprinting &amp; Licensure recommendation.)</td>
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<tr>
<td>Address:</td>
<td>Phone:</td>
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## I. CTE FIELD SELECTION

Indicate the CTE field in which you will be applying for licensure.

- [ ] CTE—Natural Resources (e.g., Agriculture, Food and Natural Resources, etc.)
- [ ] CTE—Business (e.g., Business Tech, Entrepreneurship, Finance, Management, Marketing, Retail, Travel Industry Mgmt, etc.)
- [ ] CTE—Arts and Communication (e.g., Digital Media, Graphic Design, Animation, etc.)
- [ ] CTE—Public and Human Services (e.g., Culinary Arts, Explorations in Education, Hospitality, etc.)
- [ ] CTE—Industrial and Engineering Technology (e.g., Automotive, Building and Construction, A+ Certification, Engineering, etc.)
- [ ] CTE—Health Services (e.g., Nursing, Occupational Therapy, Public Health Administration, etc.)

## II. UH SYSTEM STUDENT STATUS

Are you a current UH System student?  [ ] YES: _____________________________(List Campus)  [ ] NO

## III. PROGRAM ENTRY REQUIREMENTS

Indicate how you meet the program entry requirements for the Alternative Certification program.

- [ ] Option #1: Bachelors Degree (Major: _____________________________)
- [ ] Option #2: Associates in your CTE Field (Major: ____________________) and 3 years of industry experience
- [ ] Option #3: Associates not in your CTE Field (Major: ____________________) and 5 years of industry experience

For Associate graduates only (Bachelor graduates are exempt from this requirement):

List your passing Praxis CORE scores (official or copies of Praxis scores must be submitted with this application to be considered).

Reading: _______________  Writing: _______________  Math: _______________  Date Test Taken: _______________

*Scores may be submitted to Leeward CC-AAT Office directly from ETS. Leeward Community College School Code is 4356.*
IV. CONTENT KNOWLEDGE REQUIREMENT

HTSB requires that a candidate be able to demonstrate content knowledge prior to student teaching (i.e., ED 295B). Please indicate how you will meet this requirement prior to your last semester in the Alternative Certification for CTE Licensure program.

☐ Praxis II in content field (see Section 1 for pathways that offer content knowledge Praxis II exams); OR

☐ Current valid National Industry Certification in the content area; OR

☐ Current valid industry license in the content area; OR

☐ Documentation of 5 years of successful industry experience related to content area

OR, if none of the above exist:

☐ 30 hours of university credit coursework in the specific content area, at least 12 of which are upper division.

NOTE: Content knowledge requirements are subject to change based on HTSB licensure requirements. Refer to HTSB website at www.htsb.org for the most updated information.

V. EMPLOYMENT INFORMATION

Are you currently employed with the Department of Education (DOE)?  □ YES  □ NO

If yes, please provide the following information:

Name of School: ____________________________________________    # Years Employed: ______________

Your Job Title: ________________________________________________

Name of your Division Chair: _______________________________________________________________________________  

Div Chair Phone: ___________________________       Div Chair Email: _______________________________________________

VI. OTHER INFORMATION

Use a separate sheet to answer the following questions. Answers should be typewritten and/or legible.

1. What motivated you to apply for the Alternative Certification for CTE Licensure program?

2. Describe any formal or informal teaching experiences you have had.

3. How comfortable are you with using technology (e.g., computer, word processing, internet, etc.)? Please identify any areas in which you will need technology support in order to be successful in this program.

4. What, if any, additional challenges do you foresee while in the Alternative Certification program?

5. Please share any other information about yourself that you feel will help us in this application review process.

I hereby certify that the information contained in this application is true, correct, and complete. I agree and understand that any false or misleading statements or omissions made in this application are grounds for disqualification from further consideration or for dismissal from the program, regardless of when and how discovered. Additionally, information that cannot be officially verified may be a basis for not recommending me for teacher licensure via the Alternative Certification for Career and Technical Education Licensure program at Leeward Community College.

Signature of Applicant: ____________________________________________    Date: _________________