School of Education - Certification of Teaching Experience

Leadership in Educational Administration, PhD, EdS, MS
Special Education Leadership, PhD

This form must be submitted by each applicant to the MS, EdS, and PhD in Education programs for the Leadership in Educational Administration specialization and the PhD in Education program for the Special Education Leadership specialization. Please indicate your agreement and understanding with the statements below by checking the appropriate option, providing a narrative (if necessary), checking the acknowledgement box, and clicking the submit button.

Your application will not be complete and will not be considered until this form has been received by Capella University.

National standards of reputable organizations (National Board of Professional Teaching Standards - NBPTS, National Council for Accreditation of Teacher Education - NCATE), as well as Minnesota state standards require three years of licensed teaching experience for administrative licensure. Therefore, three years of licensed teaching experience is a Capella admissions requirement to the Leadership in Educational Administration specialization at any level, and for our PhD in Education, Special Education Leadership specialization.

Educators who seek the benefit of the competencies delivered in these programs may not intend to seek state administrative licensure. Others may be teaching in states that do not require three years of teaching experience for administrative licensure or are in a setting (private or alternative) that does not require a license. In order to provide these educators access to further training, Capella may allow applicants without three years of licensed teaching experience and/or a current K-12 teaching license to enroll in these specializations. However, they are required to complete this form and verify their understanding of issues related to school access and administrative licensure that may arise if the applicant does not possess three years of licensed teaching experience and/or a current K-12 teaching license. Furthermore, the applicant must provide a narrative regarding the specifics of his/her situation for review by the specialization faculty chair prior to a full-admission decision.

Please read the following four statements, then check only the one that indicates your actual status:

Statement 1 of 4: Current K-12 license and 3 full years of K-12 teaching experience
I have completed three full academic years of licensed K-12 teaching experience, and my K-12 teaching license is current.
☐: Check box to indicate acceptance of above statement

Statement 2 of 4: Current K-12 license, but do not have 3 full years of K-12 teaching experience
I have completed three full academic years of licensed K-12 teaching experience, but I do not have a current K-12 teaching license. I understand and accept that I am responsible for determining the licensing standards in any state I wish to seek licensure, and I understand that a current K-12 teaching license may be mandatory for administrative licensure as well as completing the clinical experience component of this program in a public K-12 setting. (In the area provided below, please provide a narrative regarding your plans, if any, to obtain a current K-12 teaching license, as well as how and where you plan to complete the field experience component of either of these state-approved, administrative programs.)
☐ : Check box to indicate acceptance of above statement
Statement 3 of 4: No current K-12 license, but have 3 years of K-12 teaching experience

I have not completed three full academic years of licensed K-12 teaching experience, but I do have a current K-12 teaching license. I understand and accept that I am responsible for determining the licensing standards in any state where I wish to seek licensure, and I understand that a minimum number of years of licensed teaching experience may be mandatory. (In the area provided below, please provide a narrative explaining if/when you will obtain three years of licensed teaching experience, where you plan to complete the clinical experience component, and/or if obtaining administrative licensure in your state is an objective via completion of either of these state-approved, administrative programs.)

☐: Check box to indicate acceptance of above statement

Statement 4 of 4: Neither have K-12 license nor 3 full years of K-12 teaching experience

I have not completed three full academic years of licensed K-12 teaching experience and I do not have a current K-12 teaching license. I understand and accept that I am responsible for determining the licensing standards in any state where I wish to seek licensure, and I understand that a minimum number of years of teaching experience and a current K-12 teaching license may be mandatory for administrative licensure. (In the area provided below, please provide a narrative regarding why you should be considered a candidate for admission, as well as how and where you plan to complete the clinical experience component of either of these state-approved, administrative programs.)

☐: Check box to indicate acceptance of above statement

If you have a current or expired license, please use the following fields to provide area of licensure, state where you are/were licensed, and applicable license or file number. If you do not have a current or expired license, please put “n/a” in each of the fields below.

<table>
<thead>
<tr>
<th>Area of Licensure:</th>
<th>License/File Number:</th>
<th>Licensed Country:</th>
<th>Licensed State:</th>
</tr>
</thead>
</table>

☐ By checking this box, you, the applicant, acknowledge that you understand and accept the statements in the Certification of Licensed Teaching form.

Date  Signature  Name (please print)

After completing this certification, please fax or mail it to:
Capella University
Admissions Office
Fax: (612) 977-5060 or 1-888-227-8492 (toll-free) By faxing, you have agreed that a faxed copy of this form shall have the same effect and may be used for the same purposes as the original.
Mail: Capella University, 225 South 6th Street, 9th Floor, Minneapolis, MN 55402