



This section must be completed by the employing Alabama school system or nonpublic/private school.
 School System Code: _____
 Nonpublic/Private School Code: _____

Application for the Emergency Certificate—Second Issuance

FORM 2EC

This application is to be completed for individuals seeking an Emergency Certificate and **submitted by the employing Alabama county/city superintendent or administrator of an eligible nonpublic/private school** directly to the Educator Certification Section of the Alabama State Department of Education (ALSDE).

PERSONAL DATA					
Legal Name as it appears on government issued identification.					
Title (e.g., Mr.)	First	Middle	Maiden	Last	Suffix
Street/Apt./P.O. Box/Route and Box			City	State	ZIP Code
Cell Telephone		Home Telephone		Work Telephone	
Social Security Number	ALSDE ID		Date of Birth (mm-dd-yyyy)		
Email Address					

FOR STATISTICAL PURPOSES ONLY		
Ethnic Origin (Choose one) <input type="checkbox"/> (01) Hispanic Latino <input type="checkbox"/> (02) Not Hispanic Latino	Gender (Choose one) <input type="checkbox"/> (F) Female <input type="checkbox"/> (M) Male	Race (Choose one or more, regardless of Ethnicity) <input type="checkbox"/> (01) White <input type="checkbox"/> (02) Black or African American <input type="checkbox"/> (04) American Indian or Alaska Native <input type="checkbox"/> (05) Asian <input type="checkbox"/> (08) Native Hawaiian or Other Pacific Islander

PROFESSIONAL STATUS AND CRIMINAL HISTORY INFORMATION

Check "yes" or "no" for each question below. "YES" responses require an attached explanation and any additional supporting documentation (e.g. court certified copies of judgment, conviction, and sentencing).

READ CAREFULLY

Yes No Have you ever had any adverse action (e.g. warning, reprimand, suspension, revocation, denial, voluntary surrender) taken against a professional certificate, license or permit issued by an agency **other than the Alabama State Department of Education**?

Yes No Are you currently the subject of an investigation involving a violation of a profession's laws, rules, standards or Code of Ethics by an agency **other than the Alabama State Department of Education**?

Yes No Are you currently the subject of an investigation involving sexual misconduct or physical harm to a child?

Yes No Have you ever resigned from a position rather than face disciplinary action?

Yes No Have you ever been convicted of, or entered a plea of no contest to a felony or misdemeanor other than a minor traffic violation?

Yes No Are you the subject of a pending investigation involving a criminal act?

SPOUSE OF OR ACTIVE-DUTY MILITARY PERSONNEL

(Per Alabama Act No. 2012-533). This section is to be completed for spouses of active-duty military personnel or active-duty military personnel who would like to request an expedited review of the certification application packet.

Yes No I am married to and living with an active-duty member of the United States Armed Forces who has been relocated and stationed in Alabama under official military orders

OR

Yes No I am an active-duty member of the United States Armed Forces who has been relocated and stationed in Alabama under official military orders.

I understand that this request to review my file on an expedited basis does not exclude me from meeting ANY Alabama teacher certification requirements, including testing.

GENERAL INFORMATION

The Emergency Certificate–Second Issuance:

1. May be issued in no more than **two** teaching fields and/or areas of instructional support. If only one area of certification is chosen on the initial application, during the valid period of the certificate, an additional area may be requested in writing by the employing LEA.
2. Is valid from July 1 to June 30 for **two consecutive** scholastic years.
3. Will **not** be issued for any special education teaching field including gifted, computer science, driver and traffic safety education, school psychology, school psychometry, or speech-language pathology.
4. Will not be issued for an individual who has held the Career and Technical Temporary Certificate for four years.
5. Will **not** be issued to an individual who holds a valid Alabama certificate
6. Is **not** an alternative certificate.
7. **Cannot** be **CONTINUED, RENEWED, REINSTATED, or REISSUED.**

RECOMMENDATION

To be completed by the employing county/city superintendent or nonpublic/private school administrator.

I recommend this applicant for the Emergency Certificate–Second Issuance in the area(s) of (select no more than **two** areas below):

Note: Emergency Certificate-Second Issuance area(s) are not required to be the same area(s) on the Emergency Certificate-First Issuance.

- | | | |
|---|--|---|
| <input type="checkbox"/> Agriscience Education | <input type="checkbox"/> English for Speakers of Other Languages | <input type="checkbox"/> Korean |
| <input type="checkbox"/> Arabic | <input type="checkbox"/> English Language Arts | <input type="checkbox"/> Latin |
| <input type="checkbox"/> Business/Marketing Education | <input type="checkbox"/> Family and Consumer Sciences | <input type="checkbox"/> Library Media |
| <input type="checkbox"/> Career Technologies | <input type="checkbox"/> French | <input type="checkbox"/> Mathematics |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> General Science | <input type="checkbox"/> Physical Education |
| <input type="checkbox"/> Choral Music | <input type="checkbox"/> General Social Science | <input type="checkbox"/> Reading |
| <input type="checkbox"/> Dance | <input type="checkbox"/> German | <input type="checkbox"/> Russian |
| <input type="checkbox"/> Early Childhood Education | <input type="checkbox"/> Health Education | <input type="checkbox"/> School Counselor |
| <input type="checkbox"/> Educational Administrator | <input type="checkbox"/> Instrumental Music | <input type="checkbox"/> Spanish |
| <input type="checkbox"/> Elementary Education | <input type="checkbox"/> Italian | <input type="checkbox"/> Theatre |
| | <input type="checkbox"/> Japanese | <input type="checkbox"/> Visual Arts |

AUTHORIZATION and RESPONSIBILITIES

- I certify this request is being made because a certified teacher is not available for employment.
- I have checked the **current** Alabama State Department of Education (ALSDE) Departmental Portal to ensure the applicant is properly certified for each period/block of the day. I understand the applicant's assignments must be in the area for which the Emergency Certificate I am requesting is proper certification.
- I understand if the individual holds an Emergency Certificate-Second Issuance or Career and Technical Temporary Certificate-Second Issuance no additional Emergency Certificates will be issued.
- I understand if I am requesting the Emergency Certificate-Second Issuance for an individual who is on the Provisional Certificate in a Teaching Field (PCTF), Provisional Certificate in Library Media or School Counseling (PCLS), or Interim Employment Certificate Approach (IEC), the individual can no longer pursue professional certification through these approaches and may not be eligible for any additional alternative certificates.
- It is strongly encouraged while the Emergency Certificate-Second Issuance is held, the LEA/eligible nonpublic/private school works with the individual to begin an approach that leads to professional certification.
 - Indicate the plan to support the approach that leads to professional certification.
 - Provisional Certificate in a Teaching Field (PCTF)
 - Interim Employment Certificate (IEC)
 - Provisional Certificate in School Counseling or Library Media (PCLS)
 - Conditional Certificate in a Teaching Field (CCTF)
 - Other Approach _____
 - **LEA/Nonpublic/Private School Representative's Initials:** _____

AUTHORIZATION and RESPONSIBILITIES – (Continue)

- I understand failure to assign the applicant properly will result in an out-of-field penalty assessment for the employing public school system.
- **I understand under Ala. Code §16-23-3(e) (1975), "time served as a teacher pursuant to an emergency certificate shall not be counted in determining continuing service status pursuant to Section 16-24-2."**
- **Applicant Initials** _____ indicating they understand issuance of the Emergency Certificate-Second Issuance does not guarantee employment during both years of the certificate's validity **and** they have received a photocopy of this form.
- **Applicant Initials** _____ indicating they understand issuance of the Emergency Certificate-Second Issuance does not lead to professional certification. An approach leading to professional certification must be pursued.

Signature of Superintendent/Nonpublic/Private School Administrator_____
School System/Eligible Nonpublic/Private School_____
Typed or Printed Name_____
Mailing Address_____
Telephone Number_____
Date_____
City_____
State_____
ZIP Code**APPLICATION PACKET CHECKLIST**

Submission of Supplement CIT with supporting documentation verifying United States citizenship or lawful presence in the United States.

Submission of Form 2EC.

A \$30.00 **nonrefundable** application fee. Each additional certificate for which an applicant is determined to be eligible will require a \$30.00 non-refundable fee for issuance. **Neither personal checks nor cash will be accepted.**

- The fee must be paid by cashier's check **or** money order made payable to the Alabama State Department of Education or through the Alabama State Department of Education Educator Certification Online Payment System, with a major credit card, at www.alabamainteractive.org/education (a \$4.00 transaction fee will be applied).
- The cashier's check, money order, or copy of the receipt verifying the confirmation number for the online payment must accompany the application packet.

Background clearance based on a fingerprint review.

- Applicants **who have not been cleared** by both the **Alabama State Bureau of Investigation (ASBI)** and **Federal Bureau of Investigation (FBI)** through the Educator Certification Section of the ALSDE are required to be fingerprinted for a criminal history background check through the ASBI and FBI.
- Applicants may **verify** whether criminal history background checks have been completed and whether they are suitable and fit to teach under state law at <https://tcert.alsde.edu/Portal>.
- Instructions regarding the fingerprint process are available through Gemalto Cogent at https://www.aps.gemalto.com/al/index_adeNew.htm or by calling (866) 989-9316.

APPLICATION SUBMISSION and ATTESTATIONS

I understand the Educator Certification Section is unable to determine eligibility for Alabama certification until all required application components have been received and reviewed. Additional information may be requested upon review of the file. The submission of supporting documents ONLY (e.g., Supplement CIT) does not constitute making an application for certification. Incomplete forms will delay the review of the file.

I understand I must meet all Alabama certification requirements in effect on the date the application is received in the Educator Certification Section. Since certification requirements are subject to change, current requirements may be viewed at www.alabamaachieves.org (click *Teachers & Administrators* ☞ *Teacher Center* ☞ *Teacher Certification* ☞ *Other Approaches* ☞ *Emergency*).

I understand I must **thoroughly read** all requirements of this approach (Form 2EC 06/2022).

If necessary, I give my permission for the Alabama public school system, Alabama nonpublic school, or Alabama college/university to forward any credential(s) required to support this certification request.

I understand it is my responsibility to keep all personal data on file in the Educator Certification Section current.

I understand the Emergency Certification Approach does not lead to Professional Educator Certification.

I understand it is my responsibility to maintain my certificate and to begin an approach that leads to professional certification.

I certify all information pertaining to this application form is true and correct and failure to submit accurate information may result in revocation or non-issuance of my certificate.

By affixing my signature to this document, I am certifying that true and correct information is being provided.

_____ Date

_____ Signature