



ALABAMA STATE DEPARTMENT OF EDUCATION
 EDUCATOR CERTIFICATION SECTION
 5215 GORDON PERSONS BUILDING
 POST OFFICE BOX 302101
 MONTGOMERY, AL 36130-2101
 Telephone: (334) 694-4557
[Alabama Achieves](http://AlabamaAchieves.org)

The Sixth-Year Equivalent Health Science 4 Career and Technical Certificate Approach 2025-2026

FORM HS4

The application process for the Sixth-Year Equivalent Health Science 4 Career and Technical Certificate **may be completed when all requirements for the prerequisite Career and Technical Health Science Certificate have been met.**

PERSONAL DATA					
<i>Legal name as it appears on government issued identification.</i>					
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 <input type="checkbox"/> Yes <input type="checkbox"/> 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 ? <input type="checkbox"/> Yes <input type="checkbox"/> 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 ? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you currently the subject of an investigation involving sexual misconduct or physical harm to a child? <input type="checkbox"/> Yes <input type="checkbox"/> No Have you ever resigned from a position rather than face disciplinary action? <input type="checkbox"/> Yes <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input type="checkbox"/> No Are you the subject of a pending investigation involving a criminal act?					
RECORD OF EDUCATION					
Degree and Major	Name of College/University	Location	Dates Attended Beginning MM/YY	Dates Attended Ending MM/YY	

The Alabama State Board of Education and the Alabama State Department of Education do not discriminate on the basis of race, color, disability, sex, religion, national origin, or age in their programs, activities, or employment and provide equal access to the Boy Scouts and other designated youth groups. The following person is responsible for handling inquiries regarding the non-discrimination policies: Title IX Coordinator, *Prevention and Support Office*, Alabama State Department of Education, P.O. Box 302101, Montgomery, AL 36130-2101, email: supportservices@alsde.edu.

GENERAL INFORMATION

This application is to be completed by individuals seeking the Sixth-Year Equivalent Health Science 4 Career and Technical Certificate and submitted directly to the Educator Certification Section.

All requirements must be met for the Sixth-Year Equivalent Health Science 4 Career and Technical Certificate **prior to** the date the application for the Sixth-Year Equivalent Health Science 4 Career and Technical Certificate is received in the Educator Certification Section.

CAREER AND TECHNICAL CERTIFICATES IN HEALTH SCIENCE

Certificates	Degree Equivalency	Valid Period	Renewable
Bachelor's Equivalent Health Science 1	Bachelor's	Minimum of 2 years ^A	No
Bachelor's Equivalent Health Science 2	Bachelor's	Minimum of 5 years ^B	Yes
Master's Equivalent Health Science 3	Master's	Minimum of 5 years ^B	Yes
Sixth-Year Equivalent Health Science 4	Sixth-year	Minimum of 5 years ^B	Yes

^A Bachelor's Equivalent Health Science 1 Certificates are valid from the date of issuance through the remainder of the same scholastic year, and thereafter, for the next two consecutive scholastic years.

^B These Career and Technical Certificates are valid from the date of issuance through the remainder of the same scholastic year, and thereafter, for the next five consecutive scholastic years.

If you hold/held ONLY a Level, Type, or Specialty Certificate, please contact the Educator Certification Section for advisement.

APPLICATION PACKET CHECKLIST FOR SIXTH-YEAR EQUIVALENT 4 – HEALTH SCIENCE

Required for issuance of the Sixth-Year Equivalent Health Science 4 Career and Technical Certificate.

Boxes are to be checked, as applicable.

Application Forms

- ☐ Supplement CIT Form with supporting documentation verifying United States citizenship or lawful presence in the United States.
- ☐ Application **Form HS4**.

Nonrefundable Application Fee

- ☐ A \$38.00 ***nonrefundable*** application fee. **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 [ALSDE Educator Certification Online Payment System](#), with a major credit card, (a 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

- ☐
 - ☐ For applicants seeking **initial certification, additional certification, or certificate renewal** to teach in Alabama, your criminal history background checks must have been completed by both the Alabama State Bureau of Investigation (ASBI) and the Federal Bureau of Investigation (FBI). You can check the status of your background checks and confirm whether you meet the state's suitability requirements for teaching at [Certificate Search](#).
 - ☐ For Applicants who **have not** been cleared by both agencies through the Educator Certification Section of the Alabama State Department of Education (ALSDE), you will need to undergo fingerprinting for a criminal history background check. Details on how to complete the background review process can be found at [Alabama Achieves - Teacher Certification](#). If you have any questions about our criminal history background check process, you can contact us at (334) 694-4557 or bgr@alsde.edu.
 - ☐ Applicants may verify receipt of their criminal history results at the ALSDE by visiting [Certificate Search](#). If your results are not located, or you have questions about your status, please allow 10 business days from the date of fingerprint submission before making an inquiry.

Occupational Proficiency

- ☐ A photocopy of the applicant's currently valid Alabama State Department of Education (ALSDE) approved **MASTER LEVEL** Occupational Proficiency in health science.
1. Information about the ALSDE-approved Occupational Proficiency in health science may be obtained at [Alabama Achieves](#) (click Teachers & Administrators ➤ Teacher Center ➤ Teacher Certification ➤ Career and Technical Certificates ➤ Degree Equivalent Certificate - Technical Education).
NOTE: The Occupational Proficiency Assessments are reviewed and updated annually. The Occupational Proficiency expires on June 30th of each scholastic year. It is the applicant's responsibility to know the Occupational Proficiency for health science, which must be met prior to applying for a subsequent Degree Equivalent Health Science certificate.
2. The Occupational Proficiency is approved by the ALSDE at the **ENTRY LEVEL** and the **MASTER LEVEL**. The **ENTRY LEVEL** meets the requirements for the Bachelor's Equivalent Health Science 1 and the Bachelor's Equivalent Health Science 2 Career and Technical Certificates. The **MASTER LEVEL** may be used to meet the requirements for any level certificate but is required for the Master's Equivalent Health Science 3 and Sixth-Year Equivalent Health Science 4 Certificates.
- ☐ A photocopy of the applicant's **currently active** Alabama license in a registered nursing, paramedical, or approved allied health specialty. The **currently active** license must have been attained **prior to** the date the application is received in the Educator Certification Section. **Issuance of each subsequent certificate also requires this currently active Alabama license.**

- ☐ Indicate the appropriate ALSDE-approved Occupational Proficiency being submitted.

Program Area	Grade Level (6-12)	Name of ALSDE-approved Alabama License, Certification, and Professional Learning	Valid Period of Currently Active Alabama License, Certification, and Professional Learning
Health Science	6-12		
Health Science	6-12		
Health Science	6-12		

REQUIRED PREREQUISITE CERTIFICATES AND TRAINING**Documentation of the required prerequisite certificate:**

- All prerequisite Career and Technical Education Certificates must be valid or all requirements must be met for eligibility to hold the valid certificate(s) prior to the date the application is received in the Educator Certification Section.
- All prerequisite Career and Technical Education Certificates in Options 1 and 2 must be in health science.

Option 1: A *valid* Master's Equivalent Health Science 3 Career and Technical Certificate.

Option 2: If the Master's Equivalent Health Science 3 Career and Technical Certificate *has not been held or has expired*, all requirements for the Master's Equivalent Health Science 3 Career and Technical Certificate must have been met by the applicant **prior to** the date the application is received in the Educator Certification Section.

- ☐ Form MH3 the *Application for the Master's Equivalent Health Science 3 Career and Technical Certificate*, with the required supporting documents.

REQUIREMENTS

For the issuance of the Sixth-Year Equivalent Health Science 4 Career and Technical Certificate, verification that requirements were met prior to the date the application is received in the Educator Certification Section.

Completion of the ALSDE-approved **MASTER LEVEL** occupational proficiency and a master's or higher degree.

- ☐ The official transcript of the applicant verifying an earned master's or higher degree in a healthcare or related area from a senior institution that was regionally accredited at the time the degree was earned. The degree must have been earned prior to the date the application is received in the Educator Certification Section.
- ☐ A photocopy of the applicant's currently valid score on the ALSDE-approved **MASTER LEVEL** Occupational Proficiency for health science
- ☐ A photocopy of the applicant's **currently active** Alabama license in a registered nursing, paramedical, or approved allied health specialty. The **currently active** license must have been attained **prior to** the date the application is received in the Educator Certification Section. **Issuance of each subsequent certificate also requires this currently active Alabama license.**

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.

~I understand the submission of supporting documents **ONLY** (e.g., official transcripts) does not constitute making application for certification. Incomplete forms will delay the review of the file.

~I understand that I must meet all Alabama certification requirements in effect on the date the application is received in the Educator Certification Section.

~I understand that **APPLICATION FORMS AND SUPPORTING DOCUMENTS ARE NOT ACCEPTED BY FAX OR E-MAIL.**

~I understand that I must **thoroughly read** all requirements of this approach (Form HS4).

~I understand issuance of **each** Degree Equivalent Health Science Career and Technical Certificate in health science requires verification of a currently valid appropriate ALSDE-approved **ENTRY LEVEL** (for the Bachelor's Equivalent Health Science 1 and 2 certificates) or **MASTER LEVEL** (for the Master's Equivalent Health Science 3 and Sixth-Year Equivalent Health Science 4 certificates) Occupational Proficiency assessment. I also understand appropriate ALSDE-approved Occupational Proficiency must be attained prior to the date the application for a subsequent Degree Equivalent Health Science Career and Technical Certificate is received in the Educator Certification Section.

~I understand issuance of **each** Degree Equivalent Health Science Career and Technical Certificate requires verification of my **currently active** Alabama license in a registered nursing, paramedical, or approved allied health specialty, which I must attain prior to the date the application for a subsequent Degree Equivalent Health Science Career and Technical Certificate is received in the Educator Certification Section.

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

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

~I understand I must meet the **current** Occupational Proficiency for any subsequent Degree Equivalent Certificates as outlined on the current Occupational Proficiency document for that scholastic year. _____ **Applicant's Initials**

Date _____ Signature of Applicant _____

I have completed the following documents, and I am mailing them to the address below:

- ☐ Supplement CIT, including supporting documentation
- ☐ Form HS4
- ☐ Money order, cashier's check, or receipt verifying online payment of \$38.00 application fee
- ☐ Required supporting documentation

All documents must be mailed to the following address:

**Alabama State Department of Education
Educator Certification Section
5215 Gordon Persons Building
Post Office Box 302101
Montgomery, AL 36130-2101**