

# Advanced Technical Credit Professional Development Part II Application

Staff Development Provider \_\_\_\_\_ SBEC CPE Provider Number \_\_\_\_\_

Teacher's Name \_\_\_\_\_ Date of Birth: MM/DD/YYYY \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Name on SBEC Texas Educator Certificate \_\_\_\_\_

High School Name \_\_\_\_\_ School District Name (Please do not abbreviate) \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

E-mail Address (required for notification of approval) \_\_\_\_\_

I have previously completed ATC training.  This is my first time to attend ATC training.

Are you a Texas certified teacher?  No  Yes Area(s) of certification \_\_\_\_\_

Complete the following table listing all related employment (**other than teaching**), if any.  
**Note: Pre-K -3<sup>rd</sup> grade teaching experience is acceptable for Early Childhood related courses.**

Employer	Position Held	Duration (yrs/mos)

List special certifications (CCAI, Cisco, NATEF, HST, Auto etc.) \_\_\_\_\_

I hold the following degree(s). (Check all that apply, and complete all fields for each degree that applies.)

- Associate's Degree      Major \_\_\_\_\_ Institution \_\_\_\_\_
- Bachelor's Degree      Major \_\_\_\_\_ Institution \_\_\_\_\_
- Master's Degree      Major \_\_\_\_\_ Institution \_\_\_\_\_
- Doctoral Degree      Major \_\_\_\_\_ Institution \_\_\_\_\_

**I am seeking approval to teach the following Advanced Technical Credit high school courses:**

HS Course Abbreviation (Ex: BEGBCIS1)	HS Course PEIMS No. (Ex: 12011200)	HS Course Name (Ex: Business Computer Information Systems I)	College Faculty Only  Initial when Part II instruction completed

**I affirm the above is true and accurate. By signing below I expressly authorize SFA to release any information I provide to ATC (including but not limited to SSN, DOB, transcripts, and/or work history) to any community college, university, or employing school district that may request or require such information.**

Teacher's Signature \_\_\_\_\_ Date \_\_\_\_\_

**For Provider Use Only:** I certify that the high school faculty member identified above has completed at least 4 contact hours (1 contact hour per course listed, plus additional, approved activities as outlined on the program agenda) of Part II, TEA-approved Advanced Technical Credit Professional Development activities.  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

# Advanced Technical Credit Professional Development Requirements for Approval

## I understand the following:

- **Attending ATC training does not guarantee ATC Approval.**
  - To be ATC Approved for a course, I must also meet the ATC Teacher requirements.
  - Since the ATC program allows students to receive college credit for a course, ATC teachers must meet the same requirements as their community college counterparts. The ATC Teacher Requirements are in place to assure colleges that award students credit that I meet the college instructor requirements.
  - ATC Teacher Requirements differ from standard high school teaching requirements; I may not be ATC Approved for some of the courses I normally teach if I do not meet the ATC Teacher Requirements for those courses.
  - ATC Teacher Requirements are subject to change. If I was ATC approved before, it is not guaranteed that I will be approved again. Each time I am trained I am subject to current requirements.
  - Until I have been ATC approved for a course (current approval is viewable on personal certificate at [www.atctexas.org](http://www.atctexas.org)) I am not authorized to teach or offer that ATC course.
  
- **The ATC Teacher Requirements are:**
  - If I have a bachelor's degree or higher, the major for that degree must be directly related to the content of the college-level ATC course.
  - If I do not have the degree specified above, then I must have at least an associate's degree (in any subject) and three years non-teaching work experience that directly relates to the content of the college-level ATC course.
  - **If I do not have a minimum of an associate's degree, I cannot be ATC Approved.**
  - Some ATC courses have additional requirements (see [www.atctexas.org](http://www.atctexas.org)).
  - If I do not have the appropriate Texas secondary teacher certification for the ATC course I want to teach, the ATC Approval Office will require that I submit official transcripts and work experience information before I can be ATC Approved.
  
- **About ATC Training:**
  - I may train only for ATC courses for which I am currently assigned to teach.
  - ATC Approvals for training completed January 1, 2009 through October 1, 2009 are good for the 2009-2010 school year only.
  - While my Part I ATC trainer and the college instructors delivering Part II training may be able to offer advice as to whether I can be ATC Approved, the final decision rests with the ATC Approval Office.
  
- **About the ATC Approval Office:**
  - After I complete Part I and Part II ATC Training, the ATC Approval Office will evaluate my ATC Application for Approval. They will notify me by email if I am approved, if I am not approved, or if I need to provide their office with more information.
  - Questions concerning the ATC Approval process should be sent to [atcstaff@sfasu.edu](mailto:atcstaff@sfasu.edu).

**I have read and understand the above information. By signing below I expressly authorize SFA to release any information I provide to ATC (including but not limited to SSN, DOB, transcripts, and/or work history) to any community college, university, or employing school district that may request or require such information.**

Teacher's Name (printed): \_\_\_\_\_ Date of Birth: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Secondary E-mail Address: \_\_\_\_\_

I attended the Part I training session in:      Month:      Year:      Location:

I completed the Part I training session online and it is current through (date): \_\_\_\_\_

**Teacher's Signature**

**Date**

Your signature on this form is **required** for your ATC Approval. For more information concerning ATC approvals, contact the ATC Approval Office by emailing [atcstaff@sfasu.edu](mailto:atcstaff@sfasu.edu).