

Hawai'i Teacher Standards Board (HTSB)
 650 Iwilei Road, Suite 201
 Honolulu, HI 96817



Contact: www.htsb.org
 Phone: (808) 586-2616
 Fax: (808) 586-2606

VERIFICATION OF QUALIFYING EXPERIENCE

To Applicant for Initial Hawai'i Teaching License: If you did not complete a state approved teacher education program **OR** if you completed an alternative certification/licensure program, **OR** if you request licensure via the "experience route" [See HTSB Form LA 2005-Instructions, Item 4(A)], HTSB may consider your application with the following required documents:

- (1) Notarized copy of your out-of-state certificate/license for the teaching field(s) for which you are seeking initial Hawai'i license. **This certificate/license must have been valid during the qualifying teaching experience(s) that you are submitting for consideration of this option.**
- (2) Completed HTSB Form LA 4005 Verification of Qualifying Experience. Qualifying professional teaching experience is defined as half-time or more and at least a semester's length of **satisfactory contracted K-12 teaching experience** in the field(s) for which you are seeking the Hawai'i license. **To qualify, the experience must have been completed in the state which issued the license for a minimum of three years during the seven years immediately preceding the date of your application for the Hawai'i license.**

Directions: 1) Make copies of this verification form to send to an **AUTHORIZED OFFICIAL** of each school or school district where you completed your qualifying satisfactory professional teaching experience. 2) You must sign Section 1, which includes the Disclaimer, before sending to the authorized official. 3) Include a stamped envelope addressed to the Hawai'i Teacher Standards Board (address above). 4) Submit valid notarized copies of your out-of-state certificate(s)/ license(s) for the qualifying professional teaching experiences with your application.

1. PERSONAL INFORMATION. Print or type in black ink. Social Security Number _____ - _____ - _____

_____ Home Phone () _____
 (Last name) (First name) (MI)
 Current Mailing Address _____ City _____ State _____ Zip _____
 Work Phone () _____ E-mail Address _____

DISCLAIMER: I hereby authorize the release of the information regarding my professional education program at the institution from which I am making this request.

Applicant signature _____ Date _____

APPLICANT: DO NOT WRITE BELOW THIS LINE

To Authorized Official: This individual has applied for the initial Hawai'i teaching license (includes school counselors and school librarians) and has requested that HTSB consider his/her qualifying professional experience(s). Please check or complete the appropriate area(s) to verify the satisfactory contracted K-12 professional teaching experience(s) in your school/school district. Please use a separate line for each year of service.

- This applicant served successfully in the following contracted K-12 position(s) in public or approved nonpublic schools in the last seven years of the applicant's date on this verification form.
- This applicant has **not** served successfully in the following contracted K-12 position(s) in public or approved nonpublic schools in the last seven years of the applicant's date on this verification form.

Contracted Position Held	Less than 50%	50% or more	From (mo/yr)	To (mo/yr)	Subject Taught	Grade Level	Required License Field

Signature of Supt., Principal, Headmaster _____ Print Name and Title _____

District/School _____ Telephone () _____

E-Mail Address _____ School Accreditation _____
 Please indicate: _____ Public School _____ Non-Public (Include a copy of state approval or accreditation status.)