

PAEC READING ENDORSEMENT
ADD-ON ENDORSEMENT APPLICATION FORM*

NAME _____ SSN _____

SCHOOL _____ District _____

I am planning to add Reading Endorsement to my current Florida teaching certificate. I understand that I will need to complete the components covering the topics prescribed by the State Board of Education Rule 6A-4.0131. I also understand that I am responsible for verification of college credits, when appropriate. To receive credit for components, I understand that I must earn the full 60 points available for each component.

I have completed the following activities (give dates) which I believe should be considered within this program,

Please give a brief statement of your reason(s) in pursuing this endorsement.

Signature

Date

Position

**Please note:*

Applicants must return this completed form to the District Professional Development Director.

District Professional Development Directors must send a copy of this form to the PAEC Professional Development Center.

**PAEC READING ENDORSEMENT
VERIFICATION OF POINTS
APPLICABLE TOWARD ADD-ON CERTIFICATION**

1. Name _____

2. School _____ District _____

3. Social Security No. _____ 5. Points on file: _____

- (1) _____ Foundations in Language & Cognition
(60 points)
- (2) _____ Foundations of Research-Based Practices
(60 points)
- (3) _____ Foundations of Assessment
(60 points)
- (4) _____ Foundations and Application of Differentiated Instruction
(60 points)
- (5) _____ Demonstration of Accomplishment
(60 points)

College courses may be substituted for any of the above components for which the course descriptions match the _____ County Master In-service Plan Components.

6. Verification of Requirements:

<u>Points Required</u>	<u>Points Verified</u>	<u>Deficiency</u>
Requirement #1 Min. 60		
Requirement #2 Min. 60		
Requirement #3 Min. 60		
Requirement #4 Min. 60		
Requirement #5 Min. 60		
Total Required 300		

Date Program Coordinator for Professional Development, PAEC

FOR _____ DISTRICT OFFICE of CERTIFICATION USE ONLY

Status of Application:

_____ Sent to Florida Dept. of Education _____ Returned for Additional Verification

Date _____ By _____

PAEC READING ENDORSEMENT
_____ COUNTY ENDORSEMENT
TRANSFER OF COLLEGE CREDIT

FOR USE BY PAEC STAFF

1. Name _____

2. School _____ District _____

3. Social Security No. _____ 4.DOE No. _____

The attached college transcripts are submitted as part of the PAEC Reading Endorsement program. These courses meet the requirements of the following component(s) in the approved _____ county program for Reading Endorsement.

Program area

Component # and Title	College Course Title
1) _____	_____
2) _____	_____
3) _____	_____

FOR DISTRICT OFFICE OF CERTIFICATION USE ONLY

No. Points Approved _____

No. Points Not Approved _____

COMMENTS:

Date

District Professional Development Director

**Please note:*

Professional Development Directors must submit a copy of this form to the PAEC Professional Development Center.