Ms./Mrs./Mr./Dr. Last First MI Other Names

Address:   Social Security (last 4 digits):

City, State, Zip:    Work Phone:

Email Address:    Mobile Phone:

Name of School: Employee’s Title: \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Administrator:    Email Address:

**Section 1** Applicant shall have a valid superintendent’s or secondary principal’s certificate as defined by the Oklahoma State Department of Education. Provide a copy of the certificate as an attachment.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Certificate Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Expiration Date

***(Section 1 required with Section 2 or 3 as applicable for experience.)***

**Section 2** Applicant shall have ***at least five years of experience*** as a CareerTech teacher, supervisor or administrator of Oklahoma Department of Career & Technology Education (ODCTE) approved programs to qualify for a ***Standard Technology Center Administrator Credential***. Provide current resume as evidence of experience.

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| Dates |  | School / Technology Center |  | CareerTech Program(s) Taught or Supervised |  |
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**Section 3** Applicant shall have ***at least three years of experience*** in one of the following to be eligible for a ***Provisional Technology Center Administrator Credential***. Provide current resume as evidence of experience.

* Career and Technology Education teacher of an approved ODCTE program
* Administrator supervising and evaluating teachers of an approved ODCTE program
* Employment at an Oklahoma technology center
* letter of endorsement from current technology center superintendent required
* Employment at Oklahoma Department of Career and Technology Education
* letter of endorsement from current ODCTE state director required

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| Dates |  | School / Technology Center / ODCTE |  | Role / CareerTech Program |  |
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I agree that the above information is correct and further documentation can be provided upon request.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_