




4. Educational Background

Begin with your most recent degree, list school, location, dates attended, degree, and GPA

School	Location	Dates Attended	Degree	GPA

5. Attach a document that addresses the following writing prompt: (Limit to one page, single space).  
Explain why you are pursuing licensure as an educational leader.

6. Provide at least three professional references that may be contacted regarding your potential for success in the program:

Name	School/Position	Years Known	Phone #

7. Attachments

Include the following documentation:

- a. Copy of valid teaching license
- b. Official transcripts from all institutions you attended
- c. Verification of teaching experience (attached)

## VERIFICATION OF TEACHING EXPERIENCE

The Arkansas State Board of Education requires a minimum of four years experience, three of which must be in a classroom at the school level for which licensure is being sought. The Department of Leadership Studies must have this verification to process the initial license application.

Please send this form to your district's Human Resource office requesting they provide the information in the table below. This information can be duplicated in a letter (please make sure all information that is requested in the table is provided), or the information can be inserted in the appropriate place in the table. The letter or this form must be signed by the Director of Human Resources.

Applicant's name:

School District:

Address:

Telephone:

Teaching Experience

<b>Grade Level</b>	<b>Number of years</b>	<b>School/District</b>	<b>Subject(s) Taught</b>	<b>School Years</b>
P-4				
5-6				
7-8				
9-12				

Signature: Director of Human Resources: