

ARKANSAS DEPARTMENT OF EDUCATION
Reading Specialist Licensure Endorsement
Grades P-8 and 7-12
Additional Licensure Plan, (areas 297, 298)

Name: _____ S.S.#: _____

Mailing Address: _____

City, State, Zip: _____

Home phone: (____) _____ Work Phone: (____) _____

Email address: _____ County: _____ School District: _____

School districts seeking to employ teachers to teach out of field (not in the field in which the teacher is currently licensed) will use the Additional Licensure Plan (ALP) to meet that need. School districts may use the ALP process to address unusual emergency situations when licensed teachers are asked to teach in areas/levels for which they are not licensed. School districts may not exceed the three-year limit without possible penalty.

THIS AREA CANNOT BE ADDED BY TESTING ONLY.

Eligibility guidelines. Teachers must meet the following conditions:

- possess an initial or standard teaching license,
- seek to add this area of licensure or endorsement, and
- be assigned to teach in this area rather than the one for which they are currently licensed
- submit documentation of at least one year of teaching experience
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Teachers assigned to work in this endorsement area must complete an approved graduate level performance-based program of study identified by the university, or complete a master's degree in Reading. They must also pass the required assessment(s) for the new licensure area. The additional area of licensure will be added to the credential when all licensure requirements are successfully completed and application is submitted bearing the signature of the university's Licensure Officer, verifying completion of the program of study. Test score(s) and official transcript must be attached.

Required assessments:

- **Praxis II: Reading Specialist, test #0300**
Minimum score required: 560

NOTE: Test at a Glance (TAAG) study guide booklets are available on line from www.ets.org/praxis/prxar.html. Any teacher registering to take any Praxis assessment is strongly encouraged to obtain these study materials.

The following background is strongly recommended before attempting the Praxis testing:

Recommended Content background:

- ✓ Linguistic and cognitive bases of the reading process,
- ✓ Reading comprehension,
- ✓ Word identification,
- ✓ Vocabulary development,
- ✓ Reading methodologies,
- ✓ Diagnosis and reading program development.

Recommended Experience background:

- ✓ Developed specialized responsibilities related to the teaching of reading.
- ✓ Demonstrated understanding of language as a communication system, including the relationships between or among listening, speaking, reading, writing and thinking.
- ✓ Experience with vocabulary development and comprehension skills, including strategies for teaching vocabulary and word origins.
- ✓ Study and practice with prescription, organization, and implementation of instruction on the basis of individual and/or group diagnosis.
- ✓ Study and practice with identifying and implementing needed improvements in school reading programs, including conducting assessments, program planning, and evaluating in-service programs in reading/language instruction.

Employing school district guidelines.

- The employing district will document the need to assign a teacher out of field because an appropriately credentialed teacher is not available.
- The employing district will sign and file this ALP form with the ADE Office of Professional Licensure **within 30 days of the out-of-field teaching assignment**, thus documenting the above statement.
- The employing district understands that a teacher will have no more than three calendar years from the date of filing with the ADE to meet full licensure requirements for the additional licensure or endorsement being sought.

School District Assurances:

I certify that the above statements are true and correct to the best of my knowledge.

School District authority: _____ Date: _____

Teacher ALP guidelines.

Teachers must meet full licensure requirements for the additional license or endorsement being sought within three years of beginning the ALP.

Applicant's signature: _____ Date: _____

S.S.#: _____

RETURN COMPLETED FORM TO:

Arkansas Department of Education
Office of Professional Licensure
#4 Capitol Mall, Room 106 B
Little Rock, AR 72201-1071

Phone: 501.682.4342
Fax: 501.682.4898
arkedu.state.ar.us