



**ALTERNATE ROUTE TO CERTIFICATION FOR TEACHERS OF ENGLISH LANGUAGE LEARNERS (ARCTELL)
2014-2015 APPLICATION FOR ADMISSION**

Visit www.aces.org/teachers/arctell to see qualifications for admission.

To apply, submit the following to ARCTELL, c/o John Gustafson, 205 Skiff Street, Hamden, CT 06517:

- The completed & signed application form, including personal statement
- A copy of your CT teaching certification
- Your current résumé
- College transcripts
- Two letters of reference, including one from a current administrator
- A non-refundable application fee of \$75.00

I. PERSONAL INFORMATION

Legal Name: _____
Last *First* *Middle*

Maiden Name or Other Names Used: _____

Social Security Number: _____ Educator ID Number (EIN): _____

Work Address

Home Address

Street: _____ School: _____

City: _____ Street: _____

State/Zip Code: _____ City: _____

Home Phone: _____ State/Zip Code: _____

Cell Phone: _____ School Phone: _____

E-mail: _____ E-mail: _____

Are you a US Citizen? Yes No (list Permanent Resident Identification Number: _____)

What is your first language if other than English? _____

Have you ever been convicted of any crime, excluding minor traffic violations, or dismissed for cause from a position in a public or private school or childcare facility? Yes No *If "Yes," please explain in an accompanying letter.*

Have you ever had a teaching credential revoked or annulled in any state, territory or foreign country?
 Yes No *If "Yes," please explain in an accompanying letter.*

II. REFERENCES (list three, including one from an administrator – please submit a letter from each)

Name: _____ School: _____

Position: _____ Phone: _____

Name: _____ School: _____

Position: _____ Phone: _____

Name: _____ School: _____

Position: _____ Phone: _____



III. ACADEMIC INFORMATION

Area(s) in which you are currently certified in CT, by subject area(s) and grade level(s): _____

Full-Time Teaching Experience

Year	School District	Certified Area	Teaching Assignment
2013-2014			
2012-2013			
2011-2012			
2010-2011			
2009-2010			
2008-2009			
2007-2008			
2006-2007			
2005-2006			
2004-2005			

Professional Development in TESOL, Bilingual Education, or Technology (include dates):

Professional Recognition (e.g., special teaching awards or recognition, successful grant applications, honors):

School or community activities related to TESOL or Bilingual Education:

TESOL or Bilingual Education Experience (please describe):

Does your school currently have a full time TESOL and/or Bilingual Teacher? _____



IV. PERSONAL STATEMENT

On a separate page, please provide narrative responses of one page or less to each of the following questions (*please type*):

What is your motivation for pursuing certification to be a TESOL and/or Bilingual Teacher?

What do you see as the key roles of a high-quality TESOL or Bilingual program?

What is your experience working collaboratively with a TESOL or Bilingual teacher in your school?

What personal and professional strengths do you have that would contribute to your success as a TESOL or Bilingual teacher?

I certify that all items on this application and submitted with this application are correct and complete. I understand that incomplete information, the withholding of information or incorrect information, may disqualify me for admission to the Alternate Route to Certification for Teachers of English Language Learners (ARCTELL). I understand that my application is to be submitted complete, including the application completed by myself and letters of reference.

Signature: _____ Date: _____