Lone Star Colleges
Alternative Teacher Certification Program
2020-2021 Application Requirements

All applicants must meet the required standards established by the Texas Education Agency and Lone Star College to be admitted into the Lone Star Colleges Alternative Teacher Certification Program.

- A completed **ATCP program application** (including all requested documents)
- Registration Form and $40.00 **application fee** (non-refundable)
- **Official Transcripts** from ALL colleges/universities attended. The official transcripts may be electronically sent to ATCP@LoneStar.edu or mailed to you or our office. Transcripts must be delivered in a sealed envelope. If the transcript is sent electronically by your college, it MUST be sent as a PDF transcript.
- An overall **GPA** must be at least a 2.5 or your last 60 hours must have a 2.5 average
- **Resume** including all work and education experience. Please include any experience you have working with children.
- **Three (3) professional references.** Give the forms included in the application packet to your references, have them complete the form and they may return the form in a variety of ways; refer to the reference form.
- **Essay** on the topic, *Why You Want to Become a Teacher* (1 page recommended)
- A **qualifying exam** is required for those that do not have their bachelor’s degree. It will typically be a CATE program certification for those without a bachelor’s degree that will be required to take and pass all parts of a qualifying exam prior to acceptance into the program. Scores must be within 5 years of acceptance into the program. For test information, contact any Lone Star College System Testing Center.
  - Passing scores must be received prior to acceptance into the program.
    - **THEA** Reading: 230  Writing: 220  Math: 230
    - **TSIA** Reading: 351  Writing: 363  Math: 350  Essay: 4

**STUDENTS WITH BACHELOR’S DEGREE FROM OUTSIDE THE UNITED STATES**

International students must meet all aforementioned application requirements as well as:

- Submit a course by course equivalency assessment detailing a US Bachelor’s degree from Global or SpanTran. Transcript evaluations can be submitted by any of the companies listed on the following website: [https://tea.texas.gov/Texas_Educators/Certification/Out-of-State_Certification/Foreign_Credential_Evaluation_Services](https://tea.texas.gov/Texas_Educators/Certification/Out-of-State_Certification/Foreign_Credential_Evaluation_Services)
- Submit passing scores on the TOEFL-iBT to the ATCP office. Information about the TOEFL-iBT can be found at [www.toeflgoanywhere.com](http://www.toeflgoanywhere.com).
- Information about who needs to take the TOEFL [http://ritter.tea.state.tx.us/sbcrules/tac/chapter230/19_0230_0011-1.pdf](http://ritter.tea.state.tx.us/sbcrules/tac/chapter230/19_0230_0011-1.pdf)

- If applicable: Please include a written explanation of a GPA under 2.5.
- If applicable: Please include a written explanation of any criminal history.

**When most of the application items are turned in**, you will be invited to an Interview and Orientation.

**To receive your Letter of Acceptance** the following requirements need to be met:
- Completed the application steps mentioned above
- Take and pass your TX PACT Exam, if GPA requirements are not met
- Registered for a Pedagogy and Professional Responsibility (PPR) class

All aspects of the application may be e-mailed to ATCP@LoneStar.edu OR brought to OR mailed to:

**Alternative Teacher Certification Program**
Lone Star College-North Harris
2700 W. W. Thorne Drive, CMED 102
Houston, TX 77073
2020-2021
Date Application Submitted ___________
Name on your government issued identification is required

Name __________________________________________
Legal Last Name First Name Middle Name
__________________________________________
Maiden Name and/or Other Names Used on Legal Documents

Address __________________________________________
Apt # __________
City State Zip Code

Primary Phone: (____) ____________________
Secondary Phone: (____) ____________________
E-mail Address ________________________________

Social Security Number __________ - ______ - __________

Are you currently a US Citizen?  ☐ Yes  ☐ No
Current Visa type: ______________ Exp. Date:____

Birth Date: _______/_______/ ________
MM DD YYYY

Identify ONE Content Area for your initial certification.  Supplemental Certifications may be added if criteria is met.

Have you ever applied to an Alternative Teacher Certification Program before?
☐ No  ☐ Yes

Select your preferred route to certification:

☐ Internship (two semesters as “teacher of record” under employment contract with an accredited district for full teacher salary; you seek your own job)

☐ Clinical Teaching (one semester as non-contract, non-paid student teacher; you are placed by our program in a cooperating district/school in the area)

Please provide your birth date to verify whether there have been previous teaching permits.

Lone Star College
Alternative Teacher Certification Program
Application Form

OFFICE USE:
Student ID#: ___________
TEA ID#: ___________

ATCP Application—Page 1 of 4
**Education:**
Submit an official transcript from every college and university attended, including Lone Star College

Highest Degree conferred ________/ ______/ ______ by __________________________    Cumulative GPA: ________

Month          Day        Year                                 College/University

Located City/State_____________________________ Major ____________________ Minor __________________

<table>
<thead>
<tr>
<th>List All Colleges and Universities Attended</th>
<th>City/State</th>
<th>Dates Attended</th>
<th>Type of Degree Earned</th>
<th>Date Conferred</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Resume:**
Submit your professional resume including work history. It should demonstrate your experience in content knowledge, people skills, technology, education and experience working with children.

**Professional References:**
Three (3) professional reference forms are required. Please distribute forms to three (3) people who can evaluate your work experience, ethics and professionalism. Your references can mail or e-mail these forms to our program.

In the space below, please list your references.

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Essay:**
Write a one-page essay by responding to the following question in complete sentences and appropriate paragraphs. PLEASE PROOFREAD THOROUGHLY to ensure that proper grammar, spelling, and punctuation have been used. A typed document is required. Topic: Explain why you want to be a teacher.

**Qualifying Exam:**
The Qualifying Exam MUST be passed by those who do not have a bachelor’s degree. The ATC program office will give guidance as to which exam is required. Scores must not be more than five years old. It is the applicant’s responsibility to fax or deliver test scores to the Lone Star Colleges ATC program office.

<table>
<thead>
<tr>
<th>THEA</th>
<th>Reading: 230</th>
<th>Writing: 220</th>
<th>Math: 230</th>
</tr>
</thead>
<tbody>
<tr>
<td>TSIA</td>
<td>Reading: 351</td>
<td>Writing: 340</td>
<td>Math: 350</td>
</tr>
</tbody>
</table>
Students with an International Degree

International students must meet all aforementioned application requirements as well as:

- Submit a course by course equivalency assessment detailing a US Bachelor’s degree from Global or SpanTran. Transcript evaluations can be submitted by any of the companies listed on the TEA website or www.naces.org.
- Please refer to [http://ritter.tea.state.tx.us/sbecrules/tac/chapter230/19_0230_0011-1.pdf](http://ritter.tea.state.tx.us/sbecrules/tac/chapter230/19_0230_0011-1.pdf) to see if the TOEFL-iBT is required.
- Submit passing scores on the TOEFL-iBT.
- Information about the TOEFL-iBT can be found at [www.toeflgoanywhere.com](http://www.toeflgoanywhere.com).

TOEFL Speaking 24, Listening 22, Reading 22, Writing 21

Background:
Have you ever been convicted of a felony? ☐ No ☐ Yes—Please provide an explanation on a separate page.

Application Fee:

Please include a Registration Form for the Application Fee, as well as payment of the $40.00 non-refundable application fee.

Affirmation:

I hereby affirm that all information provided in this application is true and accurate to the best of my knowledge. I also understand that entrance into the program based upon information contained in this application that later proves to be false or incomplete, and/or inappropriate professional behavior shall result in sufficient cause for immediate dismissal from the Lone Star Colleges ATCP.

I understand that all application fees paid are non-refundable. I understand that acceptance into the ATCP does not guarantee employment by a school district. I hereby authorize LSCS to release application information for employment purposes to local school districts; information will be released only in school district inquiries.

NOTE: The contents of this application are not intended to create any contractual or other legal rights and are designed solely as a guide for applicants to the Lone Star Colleges ATC Program.

Legal Signature of Applicant  ______________________ Date  ______________________

The following voluntary information is for reporting purposes to provide statistical information requested by various state and federal agencies:

Ethnic Background (check one):
☐ White (Non-Hispanic)  ☐ African American (Non-Hispanic)  ☐ Hispanic  ☐ Asian, Pacific Islander, Asian American  ☐ Native American or Alaskan Native  ☐ Other

Gender
☐ Male  ☐ Female

Please be aware of the following provisions of Texas law regarding requirements for employment as a Texas teacher:
19 TAC Chapter 249; §249.3 (21) Good moral character-- The [the] virtues of a person as evidenced, at a minimum, by his or her not having committed crimes relating directly to the duties and responsibilities of the education profession as described in §249.16(b) of this title (relating to Eligibility of Persons with Criminal Convictions for a Certificate under Texas Occupations Code, Chapter 53) or acts involving moral turpitude.
1. I understand that I must submit the application fee for my file to be reviewed by Lone Star Colleges Alternative Teacher Certification Program. I understand that the submission of this application does not obligate Lone Star College in any way, and the application fee is non-refundable.

2. I certify that statements made by me in this application are true, complete, and correct to the best of my knowledge and belief. I understand that any false statements, misrepresentations, or omissions made by me on the application, or in the application process shall be grounds for refusal to be admitted to the Lone Star Colleges Alternative Teacher Certification Program.

3. I understand that the Texas Education Agency (TEA) will complete fingerprinting and a criminal background check before issuing a teaching certificate.

4. I authorize Lone Star College to investigate, through whatever means deemed appropriate by the college, any information included in this application, and the facts resulting from the investigation unless otherwise noted. Lone Star College is also authorized to use any information obtained by this investigation to determine by suitability for entrance into the Alternative Teacher Certification Program. I release Lone Star College from any liability connection with the investigator.

5. I understand that meeting the eligibility requirements does not guarantee me an interview or acceptance into the Alternative Teacher Certification Program.

6. I agree to abide by all Lone Star College testing and assessment requirements. I agree to abide by the policies, procedures, rules, and regulations of the Lone Star Colleges Alternative Teacher Certification Program.

7. I agree to pay for each course at the time of registration, before the start date of the course. I understand that tuition and fees are subject to change and are non-refundable. I understand that there will be no tuition refund if I am unable to complete the training requirements. Students must officially withdraw before class begins to receive a refund. Otherwise, no refund will be given.

8. I authorize Lone Star College to release application information for group admissions interviews and employment purposes to school districts.

9. By applying to and registering for courses at Lone Star College, I agree to abide by the Student Discipline Policy and Student Rights and Responsibilities regulations published in the Lone Star College Catalog and the Student Handbook.

10. Pre-Admissions Content Testing (TX PACT) is no longer an option when I receive the letter of acceptance into the Alternative Teacher Certification Program. I acknowledge that the PACT option of testing no longer applies to me when I receive the letter of acceptance into the program. I understand that coursework may not be taken until the PACT option of the content exam is taken and passed.

11. I acknowledge that I must complete all aspects of the Alternative Teacher Certification Program and receive my standard certificate in three years or I will need to reapply to the program and follow the guidelines of the program at that time.

12. The results of an examination are confidential and are not subject to disclosure unless: the disclosure is regarding notification to a parent of the assignment of an uncertified teacher to a classroom or the educator has failed the examination more than five times. Texas Education Code 21.048(c-1)

I understand and agree to the above items.

Signature: _________________________________ Date: ________________________
PLEASE COMPLETE THIS PROFESSIONAL RECOMMENDATION FOR:

Candidate’s Name___________________________________________ Please Return by: _________________

The above applicant has selected you as a source of recommendation. We would appreciate your comments as to the applicant’s qualifications. NOTE: When this recommendation is received in the ATCP office, it is held strictly confidential and not revealed to the above named applicant.

<table>
<thead>
<tr>
<th>Check appropriate column for each item below.</th>
<th>Superior</th>
<th>Above Average</th>
<th>Average</th>
<th>Fair</th>
<th>Poor</th>
<th>Do Not Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ability to present ideas</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work habits</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional attitude</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rapport with peers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resourcefulness</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reliability</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cooperation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional appearance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enthusiasm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:
__________________________________________________________________________________________________

Reference Contact Information

Please return this recommendation to:
Alternative Teacher Certification Program
Lone Star College-North Harris
2700 W. W. Thorne Drive, CMED 102
Houston, TX  77073
Telephone: 281-312-1716
Or Scan and e-mail ATCP@LoneStar.edu
Or in a sealed envelope to applicant

Name ____________________________
Position _________________________
Company _________________________
Telephone _________________________
Address __________________________
City/State/Zip ____________________
Signature _________________________
The above applicant has selected you as a source of recommendation. We would appreciate your comments as to the applicant’s qualifications. NOTE: When this recommendation is received in the ATCP office, it is held strictly confidential and not revealed to the above named applicant.

<table>
<thead>
<tr>
<th>Check appropriate column for each item below.</th>
<th>Superior</th>
<th>Above Average</th>
<th>Average</th>
<th>Fair</th>
<th>Poor</th>
<th>Do Not Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ability to present ideas</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work habits</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional attitude</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rapport with peers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resourcefulness</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reliability</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cooperation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional appearance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enthusiasm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

Please return this recommendation to:
Alternative Teacher Certification Program
Lone Star College-North Harris
2700 W. W. Thorne Drive, CMED 102
Houston, TX 77073
Telephone: 281-312-1716
Or Scan and e-mail ATCP@LoneStar.edu
Or in a sealed envelope to applicant

Reference Contact Information
Name ____________________________________________
Position _______________________________________
Company _______________________________________
Telephone _____________________________________
Address _______________________________________
City/State/Zip _________________________________
Signature _____________________________________
The above applicant has selected you as a source of recommendation. We would appreciate your comments as to the applicant’s qualifications. NOTE: When this recommendation is received in the ATCP office, it is held strictly confidential and not revealed to the above named applicant.

<table>
<thead>
<tr>
<th>Check appropriate column for each item below.</th>
<th>Superior</th>
<th>Above Average</th>
<th>Average</th>
<th>Fair</th>
<th>Poor</th>
<th>Do Not Know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ability to present ideas</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work habits</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional attitude</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rapport with peers</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Resourcefulness</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reliability</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cooperation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Professional appearance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enthusiasm</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Comments:
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________
_________________________________________________________________________________________________

Reference Contact Information

Please return this recommendation to:
Alternative Teacher Certification Program
Lone Star College-North Harris
2700 W. W. Thorne Drive, CMED 102
Houston, TX  77073
Telephone: 281-312-1716
Or Scan and e-mail ATCP@LoneStar.edu
Or in a sealed envelope to applicant

Name ________________________________
Position _____________________________
Company _____________________________
Telephone ___________________________
Address ______________________________
City/State/Zip _________________________
Signature _____________________________
The Application Fee should be turned in when you turn in your application.

ALL FEES SHOULD BE HANDLED BY THE CE Cashier/BUSINESS OFFICE

Candidate Name:______________________________________________

Student ID # ________________________________________________

☐ Alternative Teacher Certification Application Fee
400-262-002100 $40.00

Business Office Use Only:
Date: ________________________  Semester and Year: ________________

Signature of Business Office Specialist: ________________________________