

Office of Educator Certification
PRINT ALL INFORMATION IN BLUE OR BLACK INK!

Alternative Certification District Intent to Employ
Administration Alternative Certification

Part 1 – Applicant Information to be completed by the employing school district.

South Dakota Teaching or Preliminary Certificate Number		Expiration Date	
Last Name	Last 4 digits of the SSN	-	
First Name, MI	Maiden/Previous Last Name		

Part 2 – Public or Department-Accredited school intent to employ through alternative certification.
Email completed form to certification@state.sd.us

Public or Department-Accredited School	School Building Name
<input type="checkbox"/> Superintendent: Does the applicant have a master’s degree or higher from a regionally-accredited institution of higher education? <input type="checkbox"/> Yes <input type="checkbox"/> No Does the applicant have three or more years of experience in a management role in a business, public school, or Department-accredited school or be employed as a teacher with a leadership role in a public or Department-accredited school? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please list experience.	
<input type="checkbox"/> K-12 Principal: Has the applicant completed a state-approved teacher education program or alternative certification program? <input type="checkbox"/> Yes <input type="checkbox"/> No Does the applicant have three or more years of teaching experience? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please list where, including years.	
Was the above position advertised? <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, where and how many applicants?
Did any of the applicants hold a South Dakota professional or advanced administrator certificate prior to hiring an applicant for the administrator alternative certificate? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, state the reason for not hiring.	

Part 3 – Employer requirements for employing an individual with an alternative teaching certificate.

According to ARSD 24:28:15:11, a public or Department-accredited school employing an individual with an administrator alternative certification must assign a mentor with experience as a school administrator to support the individual.
Explain the mentorship that will be provided.

We, the Public or Department-Accredited School, understand that:

- the certificate must be renewed yearly with our recommendation for renewal;
- the individual must pass the state-designated school superintendent assessment or the school leadership assessment prior to renewal of the certificate;
- the maximum length for alternative certification is five years;
- we must provide information about the South Dakota Code of Professional Ethics for Teachers in chapter 24:08:03, and the South Dakota Code of Professional Ethics for Administrators in chapter 24:11:03;
- we must train the applicant on the administrator and teacher evaluation system; and
- the individual must be working towards the requirements to obtain a professional administrator certificate for superintendent or K-12 principal.

Print Name of Authorized Official		Title of Authorized Official		
Email Address		Telephone (including area code)		
Address		City	State	Zip Code
Signature of Authorized Official				Date

Email: certification@state.sd.us

Mailing Address: Department of Education, Certification Office, 800 Governors Drive, Pierre, SD 57501