GREATER ALTOONA CAREER & TECHNOLOGY CENTER 1500 FOURTH AVENUE, ALTOONA, PA 16602-3695

(To be completed by all applicants interested in a professional staff position, i.e., administrator, counselor, co-op coordinator, teacher, etc.)

PLEASE PRINT LEGIBLY

| Applicant Name: | Date: |
|---|---|
| Position and program area applying for: | PPID #: |
| CERTIFICATE/DEGREE INFORM | ATION |
| I am currently certified in the following subject area(s): | |
| State: Identifying number: | (Social Security # or other) |
| Level of certification: | |
| Are your transcripts/certificate number under another identifying name (indicate): | |
| Are you currently working toward additional certification? Yes No | |
| What level/area? | |
| Estimated completion time? | |
| If not currently certified, are you willing to take courses and exams as necessary to obtain pro- | roper certification? Yes Not interested |
| Are you currently working toward a degree or a higher degree level? Yes NoIf ye | es, what level? |
| Major? Estimated completion of | date: |
| Has your certificate ever expired, been suspended, or been revoked? Yes No _ If ye | es, what State? |
| INCLUDE A COPY OF YOUR CURRENT TEACHING CERTIFICATE AND OFFICIAL COLLEGE TRANSCRIPTS WITH APPLICATION | |
| OTHER PROFESSIONAL LICENSING INFORMATION | |
| List any professional licenses or certifications that you currently hold: | |
| | |
| | |
| Are you currently working toward a professional license or certification? If so, please list: | |
| · | |
| Has your professional license/certification ever expired, been revoked, or been suspended? Yes No | |
| Explain: | |
| INCLUDE A COPY OF YOUR PROFESSIONAL LICENSE(S) OR CERTIFI | ICATION WITH THIS APPLICATION |

AD 1001S Revised: 08/01/16