

**NCLB HIGHLY QUALIFIED PLAN –
SEVERE / HEARING IMPAIRED / VISUALLY IMPAIRED**

Name _____ Home Phone _____

School _____ Cell Phone _____

Home Address _____ City _____ Zip _____

CACTUS ID or SS# _____

Please check the box that identifies which route you will use to become NCLB Highly Qualified.

Route 1 – Elementary Education Degree (*Attach Transcript*)

Route 2 – ETS Test (*0014-Elem School: Content Knowledge*)

I am registered for the Praxis Test (0014) on _____ (Date)

I am registering for the Praxis Test (0014) and will take it on _____ (Date)

I have taken the Praxis Test (0014) and I am waiting for my results.

I took the Praxis Test (0014) and passed. I have attached a copy of my test results.

NCLB Highly Qualified status is to be completed by: _____
Date

Teacher's Signature

Principal's Signature

Please note: As a condition of employment, Jordan School District requires all teachers to be USOE licensed and qualified as well as NCLB Highly Qualified. Continued employment is contingent upon authorization of the employee named above.
Return completed form to Jordan School District Teacher Recruitment Center.