

Kansas State Department of Education Teacher Licensure and Accreditation

900 SW Jackson, Topeka, KS 66612-1182 Phone: 785-296-2288

<http://www.ksde.org>

National Board Certification Candidate Subsidy Program

NBCT Renewal Candidates

Kansas teachers who desire to seek renewal of their National Board Certification have the opportunity to apply for a scholarship for assistance in paying the \$1,250 application fee. A fee subsidy of \$500 is provided through funds allocated by the legislature through the Governor's Teaching Excellence Scholarships program.

Attached is an application for Kansas National Board Certification Renewal Candidate Subsidy. Questions may be directed to Myra Stithem – mstitham@ksde.org or Susan Helbert – shelbert@ksde.org

For More Information on National Board Certification Renewal go to the NBPTS website: <http://boardcertifiedteachers.org/renewal>

Please pay particular attention to the renewal calendar to make sure you are within your eligibility for renewal.

Fee subsidy applications will be accepted until December 1, 2020 or until funds are depleted. Please note that fee subsidies will be awarded on a first come, first served basis. **The fee subsidy is paid directly to NBPTS.**

Return completed subsidy application by mail or email to:

Teacher Licensure and Accreditation
Candidate Subsidy Program
900 SW Jackson, Room 106
Topeka, KS 66612-1212

OR

Myra – mstithem@ksde.org or Susan – shelbert@ksde.org

KANSAS
**National Board Certification
 Renewal Subsidy**
 Application Form – 2020-2021 Assessment Year

Section A (Please print clearly)

Social Security Number ____ -- ____ -- _____			
Name (First)		Name (Middle)	Name (Last)
Home Mailing Address		City	State Zip
Employing School District			Building
School Mailing Address		City	State Zip
Home Phone () ____ -- _____		Work Phone () ____ -- _____	
Home E-Mail Address _____		Please circle one. Do you prefer to have communication directed to: Home or Work?	
Work E-Mail Address _____			

Superintendent's Name		Principal's Name	
Current Teaching Assignment <i>If your assignment or position changes, contact KSDE immediately</i>	Total Number of Years Taught	Grade	Age Level
		<input type="checkbox"/> Self-Contained <input type="checkbox"/> Departmentalized <input type="checkbox"/> Other (explain)	

1. National Board Certificate area: _____
2. Year achieved: _____
3. Respond to the following question, using no more than ½ page, typed, single-spaced: ***Why is it important to you to maintain your National Board Certification?***
4. I verify that the information on this application is true and accurate.

Signature Date