



5215 Gordon Persons Building
 Post Office Box 302101
 Montgomery, AL 36130-2101

Telephone: (334) 353-8567
www.alsde.edu/EdCert

REQUEST FOR ALABAMA TESTING RECORDS

This form is to be used to request your Alabama testing records be submitted to another state's certificate issuing authority only.

- The Alabama State Department of Education (ALSDE) will ONLY provide testing records for assessments in areas for which a Professional Educator Certificate or Professional Leadership Certificate was issued in Alabama.
- The ALSDE will ONLY provide testing records for the Basic Skills Assessments, Alabama Initial Teacher Certification Test, and/or Praxis II Subject Assessments.

If you are seeking scores for the National Teacher Exam (NTE), please contact the institution from which you earned your degree. The NTE scores were not used for certification purposes by the ALSDE.

A nonrefundable fee of \$30.00 is required. The fee may be paid by money order or cashier's check made payable to the Alabama State Department of Education. The fee may also be paid through the Alabama State Department of Education Educator Certification Online Payment System, with a major credit card, at www.alabamainteractive.org/education (a \$4.00 transaction fee will be applied). No personal checks will be accepted. The cashier's check, money order, or a copy of the receipt verifying the confirmation number for the online payment must accompany this form.

TYPE OR PRINT LEGIBLY, USING BLACK INK, WHEN COMPLETING THIS FORM. APPLICATION FORMS ARE NOT ACCEPTED BY FAX OR E-MAIL.

APPLICANT'S PERSONAL INFORMATION:

Title (e.g., Mr.)	First	Middle	Maiden	Last	Suffix (e.g., Jr.)
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Street/Apt./P.O. Box/Route and Box			City	State	ZIP Code
<input style="width: 100%;" type="text"/>			<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>
Cell Telephone	Home Telephone	Work Telephone	E-mail Address		
()	()	()	<input style="width: 100%;" type="text"/>		
Social Security Number	Date of Birth (mm-dd-yyyy)				
- -	- -				

ALABAMA TESTING RECORDS FORM IS TO BE MAILED TO:

The Alabama Testing Record Form will ONLY be mailed to the state's certificate issuing authority. If the other state's certificate issuing authority requires their form to be completed, attach the form to this one.

Name of State Certificate Issuing Authority	To the Attention of:	
Address	City, State, Zip Code	
Should your social security number be included with your testing records?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Should an Identification Number from the other state's certificate issuing authority be included with your testing records? Identification Number to be included: _____	<input type="checkbox"/> Yes <i>(If yes, provide number)</i>	<input type="checkbox"/> No
Should any other personally identifiable information be included with your testing records? Information to be included: _____	<input type="checkbox"/> Yes <i>(If yes, provide information)</i>	<input type="checkbox"/> No

Name: _____

SSN: _____ - _____ - _____

I am requesting my testing information for the following test(s) be disclosed to the recipient(s) identified above:

Check all that apply.

Basic Skills Assessments

Alabama Initial Teacher Certification Test(s) (effective 1981-1988)

Praxis II Subject Assessments

- Only scores for Alabama prescribed tests are reported to the ALSDE from the testing vendors and maintained in our test score database.
- A copy of the original score report received from the testing vendor will not be forwarded to the state's certificate issuing authority. Alabama will forward the Alabama Testing Records Form.

I have read the information contained in this form and hereby permit the Alabama State Superintendent of Education to release my testing information to the state's certificate issuing authority. I understand that the responsibility for obtaining these documents and the information contained therein remains with me, the requestor. I also understand that the Alabama State Department of Education will use due diligence to safeguard my personal information. I agree that the Alabama State Department of Education is not responsible for this information outside of its offices when mailed. I understand the Alabama State Department of Education will not, under any circumstances, email or fax the Alabama Testing Records Form.

By signing below, I release the State of Alabama, the Alabama State Department of Education, its staff, and State Board Members from any and all liability, direct or indirect, related to this form and the information contained herein.

Date

Signature of Applicant



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ALABAMA TESTING RECORDS FORM

The Alabama State Department of Education has received a request from the individual named below to provide his/her testing records.

Title First Middle Maiden Last Suffix

Social Security Number

Identification Number

Basic Skills Assessments: <i>Effective 1992-present</i>	Test Date	Pass	No Pass

Alabama Initial Teacher Certification Test(s): <i>Effective 1981-1988</i>	Test Date	Score	Pass	No Pass

Praxis II Subject Assessments:	Test Date	Score	Pass	No Pass	N/A*

*N/A – Praxis II subject assessments were not required for issuance of the Alabama Professional Educator Certificate or Professional Leadership Certificate or a required passing score had not been adopted by the Alabama State Board of Education at the time the Professional Educator Certificate or Professional Leadership Certificate was issued.

Signature of Authorized Official	Printed Name
Title	E-mail Address