



**Alabama State Department of Education**  
**Educator Certification Section**

5215 Gordon Persons Building  
Post Office Box 302101  
Montgomery, AL 36130-2101  
Telephone: (334) 694-4557 [www.alsde.edu/EdCert](http://www.alsde.edu/EdCert)

**Military Spouse *Initial* License or Certificate Fee Waiver**

*Alabama Code § 31-1-6*

This form is for a military spouse to request an application fee waiver of \$30.00 for issuance of an *initial* license or certificate. This form, along with official documentation, must be submitted with the application for issuance of the certificate or license. The fee for the required criminal history background check **cannot** be waived.

**PERSONAL DATA**

To be completed by the applicant. Type or print legibly, using black ink, when completing this form

<b>Title (e.g., Mr.)</b>	<b>First</b>	<b>Middle</b>	<b>Maiden</b>	<b>Last</b>	<b>Suffix</b>
<b>Street/Apt./P.O. Box/Route and Box</b>			<b>City</b>	<b>State</b>	<b>ZIP Code</b>
<b>Cell Telephone</b>		<b>Home Telephone</b>		<b>Work Telephone</b>	
( )		( )		( )	
<b>Social Security Number</b>	<b>Date of Birth (mm-dd-yyyy)</b>		<b>E-mail Address</b>		
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**DOCUMENTATION**

Please check the appropriate box below **and** attach official documentation (military forms, marriage/death certificate, etc.) to support your qualification status.

<b>Qualification Status</b>
<input type="checkbox"/> I am the spouse of an active duty reserve member of the United States Armed Forces, including the National Guard, who has been relocated to and stationed in the State of Alabama under official military orders.
<input type="checkbox"/> I am the spouse of an active duty transitioning member of the United States Armed Forces, including the National Guard, who has been relocated to and stationed in the State of Alabama under official military orders. A transitioning service member is a member of the United States Armed Forces, including the National Guard, on active duty status or on separation leave who is within 24 months of retirement.
<input type="checkbox"/> I am the surviving spouse of a service member of the United States Armed Forces, including the National Guard.

I understand that this \$30.00 fee waiver can only be used to request my *initial* license or certificate and each additional certificate for which I am eligible will require a \$30.00 nonrefundable fee for issuance. I certify that all information being submitted is true and correct.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature of Applicant