

AMERICAN SIGN LANGUAGE (ASL) ENDORSEMENT

Application for the Utah State Board of Education

APPLICANT INFORMATION

Name: _____ CACTUS ID#: _____

E-mail: _____

PURPOSE

This endorsement, when attached to a current Educator License, qualifies one to teach American Sign Language (ASL) in Elementary or Secondary (grades K-12) ASL classes.

ENDORSEMENT REQUIREMENT AREAS

Only one demonstration of competency needed per requirement area.

1. American Sign Language Proficiency

☐ [American Sign Language Proficiency Interview \(ASLPI\)](#) Rating: 3+ or higher

Date Completed: _____ Score/Rating: _____

☐ Bachelor's degree (or higher) in American Sign Language

University: _____ Year: _____

Degree: _____ Major: _____

☐ [American Sign Language Teachers Association \(ASLTA\) Certification](#) at Level 1 (formerly Certified) or Level 2 (formerly Master).

Date Completed: _____ Level: _____

☐ [Utah Interpreter Program \(UIP\) Certification](#):

☐ Utah Certified Professional Interpreter (UCPI) or

☐ Utah Certified Deaf Interpreter (UCDI)

Date Completed: _____ Expiration Date: _____

2. Deaf/Hearing-Impaired Cultural Competency and ASL Teaching Methods

- ☐ Bachelor's degree (or higher) in one of the following:
 - ☐ Bilingual/Bicultural Education of Deaf/Hard of Hearing
 - ☐ Deaf Education
 - ☐ Deaf Studies

University: _____ Year: _____

Degree: _____ Major: _____

- ☐ Teacher preparation program at a university in one of the following:
 - ☐ Deaf Education
 - ☐ American Sign Language

University: _____ Date Completed: _____

- ☐ [American Sign Language Teachers Association \(ASLTA\) Certification](#) at Level 1 (formerly Certified) or Level 2 (formerly Master).

Date Completed: _____ Level: _____

APPLICANT'S SIGNATURE

I certify that the information contained in this application is true.

- ☐ I have submitted any required documentation such as original transcripts, certifications, test scores, MIDAS transcripts, etc.
- ☐ Electronic transcripts must be sent directly from the College/University clearinghouse to the USBE Licensing Department at transcripts@schools.utah.gov.

Educator Signature: _____ *Date:* _____

APPLICATION SUBMISSION

Please submit application online in the Utah Educator Licensing Application system, [Survey Monkey Apply](https://usbelicensing.smaply.us) (<https://usbelicensing.smaply.us>)

Associate Level Endorsement: Degree major in ASL or one (1) of the two (2) requirement areas.