Educator Licensing http://www.cde.state.co.us/cdeprof

Emergency Educational Interpreter Authorization (EEIA) Verification Form

Applicant: Complete Section A below and forward this form to your employing school district/BOCES/facility school or state-operated program Director of Special Education for completion. Then, upload the completed and signed form into your application prior to submission to CDE. Important note: your signature on this form indicates that you understand and agree to the five statements outlined in Section B. Please initial on the line after each statement prior to submitting to your employer.

School District/BOCES/Facility School/State-Operated Program: Please complete Section B in its entirety and return to the applicant.

Section A To be Completed by the Applicant Required Field by Applicant																			
Section A To be Completed b										Hie	an	ţ				* Required Field by Applicant			
Enter the name of your employing school district, BOCES, facility school or state-operated program*																			
Last Name* First Name*							Middle Name							Date of Birth*					
List any Previous Names Used* Social Security								Email Address*											
Number* XXX X — X						K X	_												
Mailing Street Address* City*											State*	Zip*		Contact Phone	,*				
Uty*												State	2.6						
Have you previously been employed on an emergency educational interpreter?* Yes No If so, for how many							ny years?								the school years 2014-15)				
Select the area that you have tested in: the skill test minimum s											OTE: Attach documentation of e skill test minimum score for								
Applicant's Signature Date																			
Indicate the pathway you are pursuing based upon the year you are applying for																			
Year 1. AA Degree Conferred + 2. EIPA Written Test + 3. EIPA Performance (minimum score required: 2.9)																			
Г	V	Upload* your conferred AA or higher degree tra	written t	ritten test certificate					Upload* your EIPA Performance score										
4	Year One			e taken by the end of year one						NOTE: If pre-hire screening, EIPA performance test MUST									
ш			be taken							be taken no later than March of year one.									
L	Initial EEIA	Upload* your current transcript verifying com coursework toward you AA degree or higher g	stration fo	ation for the EIPA written test date.					Upload* your pre-hire screening report showing a "school can safely hire" or a "hire with caution" rating										
	Year	Upload* your conferred AA or higher degree tra		written test cerficate					Upload* your IMPROVED EIPA performance score of 2.9 or higher										
2	Two		itton						NOTE: If you have NOT pass the EIPA performance test at 3.5 or higher, you MUST enroll in an approved CDE mentoring activity										
~		Upload* your current transcript verifying compl	wiitten																
L	Temporary Progress	coursework toward you AA degree or higher gra								Upload* evidence of mentoring enrollment									
	Year	Upload* your conferred AA or higher degree tra	nscript							Upload* your IMPROVED EIPA performance score of 2.9 or higher									
3	Three	NOTE: Program MUST be completed by the end	MUST be completed by the end of year three Upload* your EIPA							written test cerficate					NOTE: If you have NOT pass the EIPA performance test at 3.5 or				
ľ	T		oload* your current transcript verifying completed										higher, you MUST enroll in an approved CDE mentoring activity Upload* evidence of mentoring enrollment						
L	Temporary Progress	coursework toward you AA degree or higher gra										ce MUST be taken no later than March of year 3							
	EEIA	AA Degree or Higher Confe	ritten	tten Test Certificate EIPA Perf								formance (minimum score required to pass program: 3.5)							
	emporary	Once you meet the requirements to be fully aut the checklist by visiting our website at http://w	ww.cde.state.co.us/	cdeprof/	checklis	t-initia	ledinterp	oreter.								terpreter application. Follow			
*1	mland dan	NOTE: If you are NOT eligible for the full Educa							_					rado as an	Educational Inter	preter.			
*Upload documentation into your eLicense application. Do not mail any hardcopies to CDE - these documents must be in your application.																			
Section B To be Completed by the School District/BOCES/Facility School or State Operated Program																			
By signing this form, the school official at the school district/BOCES/facility school/state-operated program certifies that a fully qualified educational interpreter is not available to provide interpreting services in the area specified above, and the that the applicant named above:																			
	, ,	,																	
		Igrees to meet all of the requirements of the Em Issures that he/she will become fully qualified b	• .						ization										
		f the Interpreter has not satisfied ALL deficiency																	
	•	a. Must reapply for the Emergency Educational							•		ume	entation of	progress.						
		Inderstands that the Emergency Educational Int	•								•				•				
		nderstands that if you are NOT eligible for the						at the e	end of	you	r thi	rd year of h	nolding th	e Emerge	ency Education	al Interpreter			
L		uthorization, you CANNOT BE EMPLOYED in Co	norado as an Edl	cationa	ıı ınter	prete	ir.												
Na	me (printed	<u> </u>					Title							То	day's Date				
Signature							Cont	act Ema	il Addre	ess				1					
X																			
	-																		