



# Administrative Staff

## Education Factor

### Degree/Credit Verification Form

Idaho Code §33-1004A provides administrative staff an education factor based on degree and credits:

- baccalaureate degree and twelve (12) credits
- baccalaureate degree and twenty-four (24) credits
- master’s degree OR baccalaureate degree and thirty-six (36) credits
- master’s degree and twelve (12) credits OR baccalaureate degree and forty-eight (48) credits
- master’s degree and twenty-four (24) credits OR baccalaureate degree and sixty (60) credits
- master’s degree and thirty-six (36) credits OR educational specialist degree OR doctoral degree

This form may be used to identify the degree and credits education factor. It is up to the district or charter school to determine the best degree and credit combination. Only transcribed credits and degrees earned at a regionally accredited institution and credits earned after initial certification will be counted. Credits must be earned prior to the last Friday of September to count for that school year. This form and all supporting transcripts will be verified by the Certification and Professional Standards Department and added to the educator’s certification file in accordance with Section 33-1004A(3), Idaho Code .

Mail completed form and highlighted transcripts to:

**State Department of Education**  
**Attn: Certification Department**  
**PO Box 83720**  
**Boise, Idaho 83720-0027**

### SECTION I – ADMINISTRATOR STAFF INFORMATION

<b>Full Legal Name</b>	<b>Maiden/Former Name</b>
<b>Current Personal Street Address</b>	<b>Date of Birth</b>
<b>City, State, Zip</b>	<b>EDUID #</b>

### SECTION II – DISTRICT/CHARTER SCHOOL INFORMATION

<b>District/Charter School Name</b>	<b>District/Charter School Number</b>
<b>Name of Individual Verifying Credits/Degree</b>	<b>Title/Position</b>

### SECTION III – EDUCATION FACTOR – CHOOSE ONLY ONE

Please note these are listed in ascending order (lowest to highest factor).

*Submit transcripts showing completion of degree and credits based on the criteria identified in selected option. Highlight courses on the transcripts and return with this form.*

#### Baccalaureate Degree and Twelve (12) Semester Credits

Credits must be completed after initial certification and completion of baccalaureate degree. Please highlight courses on the transcripts that meet requirements. If initial certification was out of state, include documentation verifying initial certification date.

Baccalaureate Program Completion Date	College/University Name	Initial Certification Date

#### Baccalaureate Degree and Twenty-four (24) Semester Credits

Credits must be completed after initial certification and completion of baccalaureate degree. Please highlight courses on the transcripts that meet requirements. If initial certification was out of state, include documentation verifying initial certification date.

Baccalaureate Program Completion Date	College/University Name	Initial Certification Date

#### Baccalaureate Degree and Thirty-six (36) Semester Credits

Credits must be completed after initial certification and completion of baccalaureate degree. Please highlight courses on the transcripts that meet requirements. If initial certification was out of state, include documentation verifying initial certification date.

Baccalaureate Program Completion Date	College/University Name	Initial Certification Date

#### Master's Degree

Master's Degree Program Completion Date	College/University Name

#### Baccalaureate Degree and Forty-eight (48) Semester Credits

Credits must be completed after initial certification and completion of baccalaureate degree. Please highlight courses on the transcripts that meet requirements. If initial certification was out of state, include documentation verifying initial certification date.

Baccalaureate Program Completion Date	College/University Name	Initial Certification Date

**☐ Master’s Degree and Twelve (12) Semester Credits**

Credits must be completed after initial certification and completion of master’s degree. Please highlight courses on the transcripts that meet requirements. If initial certification was out of state, include documentation verifying initial certification date.

<b>Master’s Degree Program Completion Date</b>	<b>College/University Name</b>	<b>Initial Certification Date</b>
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**☐ Baccalaureate Degree and Sixty (60) Semester Credits**

Credits must be completed after initial certification and completion of baccalaureate degree. Please highlight courses on the transcripts that meet requirements. If initial certification was out of state, include documentation verifying initial certification date.

<b>Baccalaureate Program Completion Date</b>	<b>College/University Name</b>	<b>Initial Certification Date</b>
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**☐ Master’s Degree and Twenty-four (24) Semester Credits**

Credits must be completed after initial certification and completion of master’s degree. Please highlight courses on the transcripts that meet requirements. If initial certification was out of state, include documentation verifying initial certification date.

<b>Master’s Degree Program Completion Date</b>	<b>College/University Name</b>	<b>Initial Certification Date</b>
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**☐ Master’s Degree and Thirty-six (36) Semester Credits**

Credits must be completed after initial certification and completion of master’s degree. Please highlight courses on the transcripts that meet requirements. If initial certification was out of state, include documentation verifying initial certification date.

<b>Master’s Degree Program Completion Date</b>	<b>College/University Name</b>	<b>Initial Certification Date</b>
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**☐ Educational Specialist Degree**

<b>Educational Specialist Degree Program Completion Date</b>	<b>College/University Name</b>
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**☐ Doctoral Degree**

<b>Doctoral Degree Program Completion Date</b>	<b>College/University Name</b>
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