Applying for the Type 10. K-12 Reading Specialist Certificate
Through the NIU Entitlement Program

1. Complete the required course work. Take and pass the following certification tests. Contact your Regional Office of Education for testing dates and sites or check the ISBE website at http://www.isbe.net/certification/html/testing.htm

   - Basic Skills Test (unless you have already taken and passed this test)
   - Content Test - Reading Specialist (Test #176)
   - Assessment of Professional Teaching (APT- K-12)

   NOTE: You can learn more about the tests, obtain study guides, and find out dates and locations of the tests at the ICTS – Illinois Certification Testing System website http://www.isbe.state.il.us/certification/html/testing.htm

2. When you register to take the test, be sure to indicate that your scores should be sent to NIU. You should take and pass the test before applying for certification.

3. Complete the NIU Application Packet for Type 10 K-12 Reading Specialist Certification (available from your advisor or the Literacy Suite Secretary at 815-753-1417).

   This packet includes the forms listed below and provides directions for the submission of photocopies of your transcripts (only non-NIU transcripts must be supplied) and photocopies of all valid teaching certificates.

   - Cover Sheet / Questionnaire
   - Gender/Ethnicity Form

Submit your Application Packet to the following address:

   Northern Illinois University
   Department of Literacy Education
   Reading Specialist Certification Application
   Attn: Literacy Suite Secretary
   DeKalb, IL 60115-9913

Once your application packet is received at NIU, verification of completion of requirements for the Type 10 K-12 Reading Specialist Certificate will be undertaken and notification will be sent to the ISBE. This process typically takes approximately one month to complete. After this process is completed, a postcard will be sent to you by NIU informing you that you should go on-line to apply for your Type 10 K-12 Reading Specialist Certificate at ECS- Educator Certification System https://sec1.isbe.net/ecs/

NOTE: Be sure to make a photocopy of all materials for your own files.
Dear Candidate:

Enclosed are the necessary materials needed for your application for the Type 10 Standard Special Certificate: Reading Specialist. Please complete the information below and the enclosures and return all necessary materials in the enclosed envelope at the midpoint of the final semester of your degree or certification program.

ZID ________________________________

Home Phone (    )______________________________  Work Phone (    )______________________________

Complete the following:

Check One:

_____ I will be completing all requirements for the Type 10 Standard Special Certificate: Reading Specialist in: (circle one)  May  Aug  Dec  year _____________

I am currently enrolled in the following course(s): ____________________________________________

_____ I completed all requirements for the Type 10 Standard Special Certificate: Reading Specialist in: (circle one)  May  Aug  Dec  year _____________

Check each to verify completion:

_____ I hold a valid Illinois teaching certificate (photocopies must be submitted).

My current teaching certification is: ____________________________________________

_____ I have completed the gender/ethnicity form.

_____ I have submitted photocopies of transcripts from all undergraduate and graduate degree institutions, other than NIU. These must be submitted before your application will be processed.

__________ undergraduate degree (other than NIU)

__________ graduate degree (other than NIU)

__________ graduate course work (other than NIU)

Completion of course requirements and/or deficiencies for the appropriate administrative endorsement will be verified by the College of Education and usually takes approximately one month after the end of the semester or summer term. Once this process is completed, NIU will recommend you to the ISBE by verifying completion of NIU’s approved Type 10 program. You will be notified that this recommendation has been made, and you will then need to complete the online application for certification at: https://sec1.isbe.net/ecs/
REQUEST FOR TRANSCRIPT EVALUATION FOR
TYPE 10 K-12 READING SPECIALIST CERTIFICATE
DEPARTMENT OF LITERACY EDUCATION – NORTHERN ILLINOIS UNIVERSITY

SOCIAL SECURITY NUMBER___________________________________________________

NAME_______________________________________________________________
(Last)                                      (First)                                      (Middle)

MAIDEN OR PRIOR NAME_____________________________________________________

ADDRESS_______________________________________________________________
(Street)                                      (City)                                      (State)               (Zip Code)

EMAIL ADDRESS_____________________________PHONE NUMBER_________________

CURRENT TEACHING LICENSE HELD:  Illinois______________________________________
Other State_______________________________________________________________

TEACHING EXPERIENCE:
School District  Grade Level  Subjects  Number of Years
__________________________________________________________________________
__________________________________________________________________________

LIST ALL COLLEGES / UNIVERSITIES ATTENDED_____________________________________
__________________________________________________________________________

Along with this request form, you must submit official transcripts from all institutions you have attended. In addition, you must include a copy of your teaching certificate(s). Materials must be submitted at the same time in a single packet.

The fee for transcript evaluation is $10.00 for NIU students / alumni who are either enrolled in a degree program at NIU or have graduated from one. The processing fee is $60.00 for non-NIU candidates. Please include a check or money order payable to Northern Illinois University Literacy Clinic. Materials submitted without the requisite fee will not be evaluated.

Return this form with your transcripts, copy of teaching certificate, and payment to:
Northern Illinois University
Department of Literacy Education
147 Gabel Hall
Reading Specialist Transcript Evaluation
DeKalb, IL  60115

NOTE: This is not an application for admission to Northern Illinois University. You must submit a separate application to be considered for admission. Please see www.niu.edu for admission requirements and application. A transcript evaluation does not imply that the required courses will be available from NIU during the semester desired.
PLEASE COMPLETE THE FOLLOWING:

Gender Information:  

Sex  

☐ F = FEMALE  

☐ M = MALE

Ethnic Information:

TO MONITOR COMPLIANCE WITH CIVIL RIGHTS LEGISLATION, FEDERAL AND STATE AGENCIES REQUIRE UNIVERSITIES TO DESCRIBE THEIR RACIAL/ETHNIC POPULATIONS. YOUR RESPONSE TO THIS ITEM IS OPTIONAL. THE INFORMATION SUPPLIED IS USED FOR RESEARCH PURPOSES ONLY AND WILL NOT AFFECT YOUR APPLICATION. PLEASE CHECK THE CATEGORY THAT BEST DESCRIBES YOUR RACIAL/ETHNIC BACKGROUND.

1 ___ American Indian or Alaskan Native  

2 ___ Latino  

3 ___ Asian or Pacific Islander  

4 ___ African American (Not of Latino origin)  

5 ___ White (not of Latino origin)

NAME: _______________________________________

ZID: _______________________________________

NOTE: To be included with application for certification paperwork sent to our office.