ARIZONA HIGHLY QUALIFIED ATTESTATION FORM  
This document is intended as a guidance tool for LEA use.

Career and Technical Education (CTE)  
Pursuant to R7-2-302.02 and R7-2-302.03 – To be completed only by CTE teachers assigned to teach State Board approved equivalent courses (for dual credit) in Economics, English, Mathematics, & Science.

<table>
<thead>
<tr>
<th>Name:</th>
<th>SSN (last 4 digits):</th>
</tr>
</thead>
<tbody>
<tr>
<td>School:</td>
<td>LEA:</td>
</tr>
<tr>
<td>Teacher Work Email:</td>
<td>School Employment Start Date: (mm/yyyy) (Date of Hire)</td>
</tr>
</tbody>
</table>

Note: Teachers must be Highly Qualified in each core content area they are assigned to teach. If the LEA is utilizing an attestation form to gather data, a separate form should be completed for each core content area.

1. Holds a bachelor’s degree or more advanced degree from an accredited institution.  
   AND

2. Holds a valid CTE certificate  
   AND

3. Assigned to teach State Board approved equivalent courses (for dual credit) in Economics, English, Mathematics, or Science. 

Check only ONE option below:

- [ ] CTE English
- [ ] CTE Economics
- [ ] CTE Mathematics
- [ ] CTE Science
- [ ] Biology
- [ ] Chemistry
- [ ] Earth Science
- [ ] General Science
- [ ] Physical Science
- [ ] Physics

# of Periods Taught in this Core Content Area ________________

4. Check only ONE option below:
   a. [ ] Passed the appropriate AEPA or NES Subject Knowledge exam in the core academic subject area OR
   b. [ ] HQ Teacher Reciprocity - Has an out-of-state reciprocal exam or HOUSSE (documentation required) OR
   c. [ ] Holds an advanced degree in the core academic subject area OR
   d. [ ] A major/24 credit hours in the core academic subject area OR
   e. [ ] Has National Board Certification in the core academic subject area (National Board Certification in Career and Technical Education is not acceptable)

If you met the requirements for 1, 2, 3 and 4 under federal guidelines, you are considered Highly Qualified.

- [ ] Highly Qualified Teacher
- [ ] Non-Highly Qualified Teacher

I attest to the factual completion of this evaluation.

________________________________________________ _________________________  
Signature of Teacher Date

Printed Name of Principal

________________________________________________
Signature of Principal Date

7/11/16