

**ARKANSAS DEPARTMENT OF EDUCATION**  
**Drama/Speech, Grades P-8 and/or 7-12 (areas 207, 208)**  
***Additional Licensure Plan***

Name: \_\_\_\_\_ S.S.#: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Home phone: (\_\_\_\_) \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_ County: \_\_\_\_\_ School District: \_\_\_\_\_

School districts seeking to employ educators to teach out of field (not in the field in which the educator is currently licensed) will use the Additional Licensure Plan (ALP) to meet that need. School districts may use the ALP process to address unusual emergency situations when licensed educators are asked to teach in areas/levels for which they are not licensed. School districts may not exceed the three-year limit without possible penalty.

**Eligibility guidelines.** Educators must meet the following conditions:

- possess a standard Arkansas educator license,
- seek to add this area of licensure or endorsement, and
- be assigned to teach in this area rather than the one for which they are currently licensed.

**For information on adding additional licensure areas by testing out or through a program of study and testing, please refer to the Department of Education website at [www.arkansased.org](http://www.arkansased.org) and click on Educator Licensure, then Add Licensure Area to License.**

**Required assessments:**

- **Praxis II: Speech Communication, test #0221 Minimum score required: 141**
- **Praxis II: Theatre, test #0641 Minimum score required: 154**

NOTE: Test at a Glance (TAAG) study guide booklets are available on line from [www.ets.org/praxis/prxar.html](http://www.ets.org/praxis/prxar.html). **Any educator wishing to take any Praxis assessment is strongly encouraged to obtain these study materials.**

**The following background is strongly recommended before attempting the Praxis testing:**

**Recommended Content background:**

- Interpersonal and small group communication,
- Public speaking, media and their influences,
- Play production, oral interpretation,
- Forensics: classroom and curriculum instruction,
- Assessment and evaluation issues for speech and drama,
- History, theory, and literature or theatre,

- Performance, production, and creative drama,
- Design & technical aspects,
- Instruction and professional knowledge of theatre.

**Recommended Experience background:**

- Demonstrated understanding of small group communication dynamics.
- Developed proficiency in theatre production management.

**Employing school district guidelines.**

- The employing district will document the need to assign an educator out of field.
- The employing district superintendent shall submit a waiver request and completed ALP form to the ADE Office of Educator Licensure *within 30 days of the out-of-field teaching assignment*, thus documenting the above statement.
- The employing school district understands that an educator working under this ALP shall make adequate yearly progress (as specified in the Rules Governing Educator Licensure) each school year that the educator is employed in the out-of-area assignment.
- The employing district understands that an educator will have no more than three school years from the first date he/she was employed in the out-of-area assignment by any district to meet full licensure requirements for the additional licensure or endorsement being sought. A waiver request must be submitted each school year the educator is employed out-of-area.

**School District Assurances:**

I certify that the above statements are true and correct to the best of my knowledge.

Superintendent: \_\_\_\_\_ Date: \_\_\_\_\_

**Educator ALP guidelines.**

Educators shall make adequate yearly progress (as specified in the Rules Governing Educator Licensure) each school year that the educator is employed in the out-of-area assignment. If the educator EITHER leaves the ALP position OR doesn't complete the requirements within three consecutive years, he/she will NOT be eligible for employment again under an ALP for this area of licensure.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_ S.S.#: \_\_\_\_\_

**RETURN COMPLETED FORM TO:**

Arkansas Department of Education  
Office of Educator Licensure  
Four Capitol Mall, Room 106 B  
Little Rock, AR 72201-1071

Phone: 501.682.4342  
Fax: 501.682.4898  
[www.arkansased.org](http://www.arkansased.org)