

State of Nevada  
Department of Education  
Division of Educator Effectiveness & Family Engagement  
**Alternative Route to Licensure Provider Modification Request Form**

*This form is to be used only if there are non-substantive modifications*

**I. General Information**

Name of Institution/Organization \_\_\_\_\_ Name of Program(s) \_\_\_\_\_  
Name of Primary Contact \_\_\_\_\_  
Mailing Address \_\_\_\_\_ Phone \_\_\_\_\_  
Fax \_\_\_\_\_ Email \_\_\_\_\_

**II. Program Licensure Areas:** Indicate the licensure area(s) for which your institution/organization has been approved and is requesting a modification. ([NAC 391.0573](#))

- Early Childhood Education (Birth to Grade 2)
- Elementary (Grades K-8)
- Secondary (Grades 7-12)
  - Biological Science
  - Mathematics
  - Art
  - Music
  - Other Secondary Content Area(s) (specify) \_\_\_\_\_
- Physical Science
- Language Arts
- Social Studies
- Foreign Language (specify) \_\_\_\_\_
- Special Education
  - Generalist
  - Autism
  - Other (specify) \_\_\_\_\_
  - Early Childhood Developmentally Delayed
  - Intellectual Disabilities
- All Grades (Grades K-12)
  - Music
  - Physical Education
  - Administrator
  - Art
  - Other (specify) \_\_\_\_\_

**III. Type of modification requested:**

- Course title change. (Please explain) \_\_\_\_\_
- Praxis test change. (Please Explain) \_\_\_\_\_
- Course Substitution. (Please Explain) \_\_\_\_\_

➤ Course Substitution requires verification of an approved curriculum by The Nevada State Board of Education.

**IV. Authorizing Signatures attesting the above information is accurate.**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

\_\_\_\_\_  
Authorizing Signature (or designee) \_\_\_\_\_ Date

School District Superintendent  Institution/Organization CEO  University/College Dean of Education

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

\_\_\_\_\_  
ARL Program Director Signature (or equivalent official) \_\_\_\_\_ Date

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**Signatures on this application indicate acknowledgement of the conditions below and agreement to adhere to [NAC 391.461](#) and [NAC 391.057](#), [391.0575](#), and [391.0577](#):**

The **provider** is responsible for:

- adhering to the participant screening procedure outlined in the application and ensuring all participants hold the minimum qualifications.
- following the program approved by the Commission and contacting the Nevada Department of Education concerning any and all possible deviations from the approved program.
- following through with all training outlined in the program once a participant is accepted. At no time is the provider permitted to suspend training or request any licensee extensions from the Office of Educator Licensure.
- advising accepted participants of all conditions required for successful completion of their programs. Department staff will not advise participants about provider program requirements.
- informing participants of all necessary requirements/documents needed to apply for their ARL/conditional licensure, as well as requirements/documents needed to apply for a standard license upon successful completion of the program.
- ensuring that all staff members who will be in a school setting and left alone with any students in grades PreK - 12 are fingerprinted. Provider to conduct a background check and review a criminal history report of their staff members who will be in a school setting. Staff members who have been convicted of a crime involving moral turpitude will not be allowed in a school. However, if the provider determines the conviction is not related to their position and does not present a risk to children they will be allowed into the classroom.
- providing the Office of Educator Development & Support with names and areas of licensure of participants who:
  - are accepted into their approved program(s).
  - complete all requirements necessary for ARL/Conditional licensure and pre-hire eligibility:
    - outlined in [NAC 391.057](#); and
    - training, testing, and/or school-based experiences required by provider.
  - fail to complete the program, including the exact date the participant was released from the program and the reason for the participant's dismissal.
  - successfully complete the program, including the exact date of completion.

The Division of Educator Effectiveness & Family Engagement is responsible for:

- issuing conditional three-year Nevada licenses to all participants who have been accepted into an approved provider program, met initial conditional licensure requirements, and submitted a license application.
- invalidating all conditional licenses once notification of a participant's termination from an approved program.
- collecting, maintaining, and disseminating all data required by Nevada regulations.
- issuing a standard Nevada license to all participants who have successfully completed an approved program, met licensure requirements, and submitted a license application.
- evaluating and auditing approved provider programs.