



# Alternative Routes Service Form Instructions

Return form by August 31, 2017

## CONTACT INFORMATION

- Fill in fields. Check box if any contact information is new.
- If we are unable to contact you, your account will enter monetary repayment status.

## TEACHING SERVICE

- **You MUST write in your Alternative Routes subject.**
- **Complete one form per district, per school year, per type of teaching.** Print as many forms as you need for different school years or districts or teaching types.
- Check the appropriate box(es) if you will verify service from more than one district or you plan to teach summer school. This lets us know whether to expect more forms from you.
- Identify the school year, district, and school(s) for this form.
- **You can only earn loan forgiveness toward your teaching obligation for teaching days after obtaining your Alternative Routes residency certificate.**
- Check the type of teaching days included on this form: contracted (full-time or part-time with FTE %), substitute, or summer school.
  - If part-time, we must know if you worked partial days of every day of the school year or all day for some days. This can affect the amount of forgiveness you earn.
- Fill in the number of full days (or equivalent) you're verifying. If you teach 6 half days, report 3 full days; if you work 11 half days, report 5.5 full days.
  - **DO NOT leave the number of teaching days blank.** You must list the actual number of full teaching days (usually 1–180).
  - List Alternative Routes subject teaching days separately from total days teaching other subjects.

## SERVICE VERIFICATION

- **No signature, no credit!** Service forms must be signed by a school or district official. If you taught in only one school during the year, the principal or vice principal can sign the form. If you taught in multiple schools, someone at the district level must sign the form (human resources, personnel, substitute coordinator, etc).

## 2017-18 TEACHING INFORMATION

- Complete the 2017-18 teaching position box if you already have a teaching position for next year. If not included on this form, you must provide **updated information by September 15, 2017**, or your account will enter monetary repayment.

**You, your school, or your district can submit your form:**

**Mail:** Washington Student Achievement Council  
Alternative Routes Program  
PO Box 43430  
Olympia WA 98504-3430  
**Fax:** 360-704-6220  
**Scan & Email:** [alt@wsac.wa.gov](mailto:alt@wsac.wa.gov)

If questions, contact Alternative Routes staff at [alt@wsac.wa.gov](mailto:alt@wsac.wa.gov) or 1-888-535-0747 (option 6)

**Your account will enter monetary repayment status if you don't return form or contact us by August 31, 2017**



# Alternative Routes Conditional Scholarship Teaching Service Verification Form

## CONTACT INFORMATION

**Name:** \_\_\_\_\_  Check if new name, address, email, or phone  
**Address:** \_\_\_\_\_  
**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Email:** \_\_\_\_\_ **Best Phone Number:** \_\_\_\_\_

Please update us if this email address changes. Email is our primary means of communication.

## TEACHING SERVICE

**IMPORTANT:** My Alternative Routes **SUBJECT(s)** is/are \_\_\_\_\_ .  
REQUIRED

- I will verify service from more than one district this year.
- I will verify summer school service this year. *Submit separate form at the end of the school year.*

School Year:  2016-17  Other school year: \_\_\_\_\_ Start date: \_\_\_\_/\_\_\_\_/\_\_\_\_ End date: \_\_\_\_/\_\_\_\_/\_\_\_\_

District: *One district per form, per year* School(s): *If substituting, may answer "various"*

<b>Type of teaching day</b>	<input type="checkbox"/> Contracted days	If contract:	If part-time:
<i>One type of teaching day per form</i>	<input type="checkbox"/> Substitute days	<input type="checkbox"/> Full time	<input type="checkbox"/> Partial day, all year
	<input type="checkbox"/> Summer school days	<input type="checkbox"/> Part time % _____	<input type="checkbox"/> All day, partial year

**REQUIRED: Number of days taught** **Reminder: Two half days of teaching earn one full day of forgiveness**

\_\_\_\_\_ # full teaching days taught in Alternative Routes Subject listed above, in grade(s): \_\_\_\_\_

\_\_\_\_\_ # full teaching days taught in other subjects: \_\_\_\_\_  
grade(s) & subject(s)

## SERVICE VERIFICATION - Please do not sign if Alt. Routes SUBJECT not indicated above.

I verify this form accurately reflects the number and subject of teaching days for the period specified.

Signature of school or district official \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_ Phone \_\_\_\_\_

Check if a significant amount of the class were ELL students

## 2017-18 TEACHING INFORMATION

I already have a teaching position for the 2017-18 school year (if known at this time).

District \_\_\_\_\_ Grade(s) \_\_\_\_\_

Subject \_\_\_\_\_  Full-time or  Part-time % = \_\_\_\_\_

If you do not have a teaching position for next year at this time, you must **provide updated information to us by September 15, 2017**, or your account will enter monetary repayment.

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 Olympia WA 98504-3430  
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[alt@wsac.wa.gov](mailto:alt@wsac.wa.gov) or 1-888-535-0747

Mail, fax, or scan and email a copy of the service form  
**Return form by August 31, 2017**