



Human Resource Department
Add-On Application Money Order Form
Charter Schools

Form can be submitted the following ways:

U. S. Mail: School Board of Polk County Certification Department
P.O. BOX 391
Bartow, FL 33831 **or** **Courier Mail:** District Certification Dept., Route E

Personal Information

SAP Number: _____ DOE# _____

Name: _____
Last *First* *M.I.*

School/Department: _____ Email Address: _____

\$75.00 Application Fee

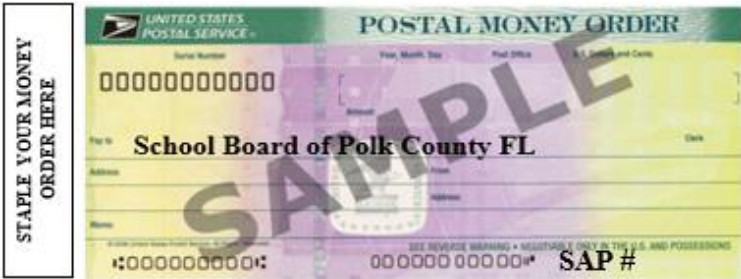
Please check the Certificate Service Requested. (Please select only one service per Form)

Add a Subject to my valid Professional Certificate by passing a Subject Area Exam

Please indicate the subject coverage to be added to your Florida Certificate _____

Add an Endorsement to my valid Professional or Temporary Certificate

Please indicate the endorsement to be added to your Florida Certificate _____



Money orders are payable to: School Board of Polk County FL. Please write your SAP # on the Money Order.

APPLICANT'S SIGNATURE

DATE

For Certification Department Use Only

Certification Staff: _____

Date Received: _____

Date Processed: _____