RED ROCKS COMMUNITY COLLEGE
VOCATIONAL CREDENTIAL APPLICATION
COVER SHEET

Applicant: _____ S-Number: _____

Signature: _____ Date: _____

RRCC Supervisor: _____

Signature: _____ Date: _____

Please list courses you are scheduled to teach. (Use an additional sheet of paper if you run out of room.)

Semester	Course Prefix	Course Number	Course Title

To be completed by the RRCC program supervisor or CTE office:

RRCC Program Name	CIP Code	Credential Name

**Go to http://www.coloradostateplan.com/criteria_postsecond.htm to view a crosswalk of CIP codes, program and credential names.

**Also, look up RRCC program approvals/CIP code at http://ctep.cccs.edu/energizer/reports/report_list.jsp#cip. Select the report titled "Active Programs for a School," then run the report for Red Rocks Community College.

➢ **INITIAL APPLICATION – REQUIRED INFORMATION**

❑ Application – signed by applicant

❑ Occupational Experience Verification – signed by employer

❑ Official Transcripts

❑ Training Certificates

➢ **RENEWAL APPLICATION – REQUIRED INFORMATION**

❑ Application – signed by applicant

❑ Signature of RRCC supervisor or chair on application, attesting satisfactory performance

❑ Training Certificates, Transcripts or evidence of hours in workshops (only if Full Time)

❑ Completion of courses/hours required for renewal (must order official transcripts)

➢ **RENEWAL APPLICATION – CONCURRENT ENROLLMENT ONLY**

❑ Renew your secondary credential no more than 6 months previous to expiration

❑ Provide a copy of your current secondary issued by CDE unless otherwise instructed on your previously issued Post-secondary