Allan Hancock College
Community Education

☐ Regular Certification
☐ Not Approved

Equivalency Certification for Noncredit
Specialized Instruction (Disabled Students Programs and Services)

Name:_____ Department: Community Education_____

Semester/Year:_____ Discipline/Area:_____

Criteria for Equivalency: The applicant named above meets the criteria for equivalency. This has been verified by review of the applicant's official college transcripts and other materials. (Attach documents used to verify candidate's qualifications.)

Minimum Qualifications

A bachelor's with any of the following majors: education of student with specific or multiple disabilities, special education, psychology, physical education with an emphasis in adaptive physical education, communicative disorders, rehabilitation, computer-based education, other computer-related majors which include coursework on adapted or assistive computer technology for students with disabilities, or other majors related to providing specialized instruction or services to persons with disabilities, or

An associate degree with one of the majors specified above (AND) four (4) years of experience providing specialized instruction or services to persons in the disability category or categories being served, or

For noncredit vocational courses, an associate degree or certificate of training (AND) four years of occupational experience related to the subject of the course taught (AND) two (2) years of experience providing specialized instruction or services to persons in the disability category being served.

Criteria for Equivalency

☐ A bachelor's degree in any discipline and two years of professional experience related to the subject of the course taught.

☐ An associate degree in any discipline and six years of professional experience related to the subject of the course taught.

☐ Six years of continuous related experience and evidence of attaining coursework or experience equal to the general education requirements as outlined in Title 5 Section 55063.

Rationale: Explain how the applicant's qualifications meet the selected guideline. Qualifications must be verified with appropriate documentation.

Signature of Candidate	Date

I have reviewed all documentation and recommend approval of regular equivalency certification.

Signature of Department Chair	Date	Signature of Dean	Date
Signature of Appropriate Academic Vice President	Date	Signature of Committee Chair Professional Standards Committee	Date

Date of Board Approval:_____