

Albuquerque Teachers Federation/Albuquerque Public Schools  
National Board for Professional Teaching Standards Candidate Support Program  
530 Jefferson NE  
505-262-2657

[www.aftunion.org](http://www.aftunion.org)

**NBPTS Renewal Candidate**  
**Registration Form for Candidate Support**  
**2016/2017**

Please fill in the form below to register for the ATF National Board Candidate Support Program. Note the following guidelines:

- **Cost for CSP support is \$250**
- **Registration MUST be paid before an NBCT will be assigned a CSP.** P.O.'s from schools are accepted. Until the fee is PAID, no CSP will be assigned.
- **Registration fees are NOT refundable.**

Name \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_  
Home Address \_\_\_\_\_ Zip \_\_\_\_\_  
School \_\_\_\_\_  
NBPTS Certificate Area and Level \_\_\_\_\_  
Payment Enclosed: \_\_\_\_\_ \$250  
\_\_\_\_\_ Check enclosed \_\_\_\_\_ P.O. # \_\_\_\_\_ Attached  
\_\_\_\_\_ Credit Card

I request \_\_\_\_\_ as my CSP. (Leave blank if no preference)  
(Please note: not all requests can be granted, but we will do our best)

**Please read this statement, sign and return with your payment and/or P.O.**

I, \_\_\_\_\_, as a candidate in the National Board for Professional Teaching Standards candidate program understand that my instructor, (will be filled out by Program Coordinator) \_\_\_\_\_, and his/her associates provide a system for support and clarification throughout the NBPTS process. I understand that the ATF Candidate Support Provider (CSP) is not liable for a pass or fail on any section of my portfolio and/ or assessment. I understand that it is my responsibility, as the candidate, to attend meetings, perform research, gather data and documents, make final choices for all items, and submit materials in a timely manner. An ATF Candidate Support Provider instructor cannot be held liable for any candidate's success or failure. I understand that once my fee is paid there are NO refunds. I understand that participation in the support group does not guarantee successful completion of the process.

Signed,

\_\_\_\_\_  
NBPTS Renewal Candidate

\_\_\_\_\_  
ATF/APS NBPTS Candidate Support Provider

\_\_\_\_\_  
Date

Questions: Please contact Ritamarie Theiler, [Theiler@aps.edu](mailto:Theiler@aps.edu)