

CERTIFICATE APPLICANTS INFORMATION

Certification requirements:

- High School Diploma or GED
- 2000 hours of library work, unpaid or paid, within five years of application
- 162 Contact Hours in specific competencies (see the certification application for this list)
- Renewals are required every three years and require additional 45 Contact Hours

Courses taken within five years of the date of application are eligible for certification purposes. Starting in January 2012, all courses must be from Western Council approved education providers.

How to Apply:

1. First, read **all** the information on this page.
2. Review the Application Form and prepare the documentation you will need to complete the application.
3. Fill out the Application Form completely, attaching required copies of training and education transcripts and employment verification.
4. Be sure to sign the application and enclose a check or money order, made out to the Western Council of State Libraries, for the \$100 application fee.

Send the check and application to:

Western Council of State Libraries
C/O BCR
14394 East Evans Avenue
Aurora, CO 80014-1408

5. You will hear back from BCR after review of your application, about eight weeks.
6. **If you have completed the necessary course work and provided all the employment and education verification**, you will receive a certificate.
7. **If your application is incomplete or if you must take more courses**, you will receive a letter outlining what you must do to be certified.
8. You can appeal any decision regarding certification to the Executive Committee. You must appeal within 60 days of receiving written notification of the decision.

LIBRARY PRACTICIONER CERTIFICATE APPLICATION

Western Council of State Libraries

APPLICANT INFORMATION

Name:

Phone:

Fax:

Current address:

City:

State:

ZIP Code:

Email:

EMPLOYMENT INFORMATION

(Please provide verification)

Current employer:

Employer address:

City:

State:

ZIP Code:

Phone:

Dates Employed:

Hours per week:

Previous employers:

Employer:

Employer address:

City:

State:

ZIP Code:

Phone:

Dates Employed:

Hours per week:

EDUCATION

High School Diploma or GED required

School:

Date Received:

LIBRARY TRAINING

(Provide copies of certification of completion or transcript for each class listed)

162 Contact Hours Required for Certification

1 CEU = 10 contact hours
1 contact hour = 0.1 CEU
1 contact hour = 50 minutes
1 academic semester hour = 15 contact hours
1 academic quarter hour = 12.5 contact hours

FOUNDATIONS – At least 24 contact hours, with a minimum of six hours in each of the following topics

Philosophy and Ethics

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

Leadership

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

ADMINISTRATION - At least 60 contact hours, with a minimum of six hours in each of the following topics

Laws

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

Library Board

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

Personnel

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

Policies and Procedures

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours

Finance and Funding

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

Facilities

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

Long-Range and Strategic Planning

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

Partnerships

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

Advocacy and Marketing

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

SERVICES - At least 30 contact hours, with a minimum of six hours in each of the following topics

Circulation

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

Reference and Information Services , including Readers Advisory

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

Adult and Children's Services

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

COLLECTIONS - At least 24 contact hours, with a minimum of six hours in each of the following topics

Planning for Collections, Materials Selection and Acquisitions

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

Collection Maintenance

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

Cataloging, Classification and Processing

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

TECHNOLOGY - At least 24 contact hours

Class name:
Provider:
Date:
Number of Contact Hours:

Class name:
Provider:
Date:
Number of Contact Hours:

Total Contact Hours completed _____

SIGNATURE

I certify that the information given on this application is true and correct to the best of my knowledge and that any false statements may result in the denial or revocation of my certification.

Signature of applicant:

Date: