

APPLICATION FOR AN ADDED TEACHING ENDORSEMENT

Part I – Applicant Information						
Last Name	First Name			M.I.		SSN
Maiden or other names used	Date o		of Birth	a		Gender
]MALE	FEMALE
Street Address		City and State			Zip code	
Daytime phone number	Evening phone number		Email address (to receive application re			plication receipt)

Part II – Applicant Background Information (Must be fully completed, incomplete applications will be returned to sender unprocessed).				
1. Have you ever been charged or convicted of a felony or ANY crime involving children, dishonesty, or a controlled substance?			YES	□ NO
2. Have you ever had any type of instructor, service provi If yes, which State/Jurisdiction:	der or administrator license denied, suspende and what action was taken: Suspended	ed, or revoked by any s	tate? 🗌 YES	□ NO
3. Is any disciplinary action pending against you in any sta	ate or jurisdiction?		YES	□ NO
4. Have you ever been dismissed from any position due to immoral or unprofessional conduct?			☐ YES	ΠNO

*If you answered 'YES' to any of these questions, you must attach a letter of explanation and copy of the official court and/or hearing proceeding documents indicating judgment and disposition of <u>each</u> offense from the presiding court or judicial office or entity. Failure to submit the requested documentation shall cause your application to be denied.

Part III – Applicant Education Information

1) In which teaching area do you hold a valid D.C. Standard, Professional or Regular II license?

2) List the subject(s) of the added teaching endorsement(s) you are seeking with this application. A fee is required for <u>each</u> evaluation request.

A)	В)

3) Indicate below how you are seeking to add a teaching endorsement:

I hold a degree or the equivalent of a degree major (30	I have achieved D.C.'s passing scores for the Praxis II Content
semester hours) in the subject area, and I have passed the Praxis	Knowledge and Pedagogy exams (where required) in the subject
II Pedagogy exam in the subject area (where required).	area of the added endorsement.

Part IV – Applicant consent and affirmation

By checking this box, I hereby authorize the Office of the State Superintendent of Education (OSSE) to share or obtain any information regarding this application with a previous, current, potential employer, or other licensing entity for use in this application process.

By my signature, I certify that the information listed on this form is accurate, complete and true. I understand that any finding of misrepresentation may result in the denial and/or revocation of my application and/or license/certificate.

Applicant Signatu	ire	Date	
FOR OFFICE USE ONLY			
Money Order #	Amount	Date received	Received by
Subject	Result	Effective Date	Evaluator
1)			
2)			

Application Packet Documentation Checklist

You must submit the following to have a complete application packet:

- □ Fully completed application form bearing all original signature(s).
- Application processing fee of \$50.00 in the form of a money order or cashier's check for each subject area evaluation being requested. Fee(s) must be made payable to: DC Treasurer. NO PERSONAL CHECKS OR CASH ARE ACCEPTED!!!
 Application processing fee(s) are NON-REFUNDABLE, even if the final determination of the application

Application processing fee(s) are NON-REFUNDABLE, even if the final determination of the application does not result in the issuance of a license.

- □ Where applicable, official transcripts or student issued transcripts <u>sealed</u> in a university or college envelope from institutions where a degree was earned and/or where coursework was completed that verifies completion of a degree major or the equivalent of a degree major (30 semester hours) in the content area of the added endorsement.
- □ Where applicable, official ETS examinee score report verifying D.C.'s passing scores for the Praxis II Content Knowledge and/or Pedagogy exams in the area of the added endorsement(s).
- □ An official copy of your arrest and criminal history record that has been issued within the previous 12 months.

Please note that current employees of DC Public Schools (DCPS) and those being hired by DCPS (who have completed the fingerprinting process) may obtain clearance records from the DCPS Office of Human Resources.

Otherwise, please visit our website for instructions regarding Criminal Background Procedures for All Applicants.

Return complete application packets to: OSSE – Division of Elementary and Secondary Education Educator Licensure and Accreditation 810 First Street, NE 5th Floor / Washington, DC 20002 Questions? Please contact: <u>educator.licensurehelp@dc.gov</u>

PLEASE NOTE THAT THIS OFFICE CANNOT MAKE COPIES OF ORIGINAL DOCUMENTATION SUBMITTED WITH YOUR APPLICATION. YOU MUST REQUEST ADDITIONAL TRANSCRIPTS, TEST SCORE REPORTS OR OTHER OFFICIAL DOCUMENTS FROM THE ISSUING ENTITY AND/OR MAKE COPIES PRIOR TO SUBMITTING AN APPLICATION PACKET.