

9. Education Including High School or Equivalency

Institution(s) Attended	Dates of Attendance		Type of Diploma or Degree Received (if any) (attach photocopy of college/university transcript or photocopy of high school diploma/GED)
	From:	To:	

10. Courses in Professional Education Completed

(only list those courses required under Section 126.6 of Commissioner's Regulations)

Name of Institution or School Association at which Course Was Completed	Course Title	Date Completed

11. Do you now or have you ever held a licensed private school teacher permit/ license? Yes No
IF YOU ANSWERED "YES" TO ITEM #11, ATTACH A PHOTOCOPY OF YOUR DOCUMENT.

12. Occupational Experience

Attach an original letter from current and/or former employers verifying at least two years of employment in the field to be taught. The letter must state the actual dates of employment and a description of the duties performed.

If you are (were) self-employed, you must follow special instructions which are enclosed with this application.

If a federal or state license is required for your occupation, you must attach a photocopy of that currently valid license to this application.

Name and Address of Employer	Dates of Employment		Title/ Duties
	From (Mo./Yr.)	To (Mo./ Yr.)	

13.

- | | | |
|---|------------------------------|-----------------------------|
| (a) Have you ever resigned from a position rather than face disciplinary charges? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (b) Have you ever been discharged from employment as a result of disciplinary action? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (c) Have you ever been convicted of any crime (felony or misdemeanor)?
If "yes," submit official copies of court report including disposition of the case. | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (d) Are you currently under charges for any crime (felony or misdemeanor)? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| (e) Have you ever had a professional credential revoked, suspended, annulled, or denied? | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

If you answered "yes" to any question, explain the response on a separate sheet.

A "yes" answer to any question is not an automatic bar to the issuance of a license/ permit.

14. Under penalties of perjury, I declare and affirm that the statements made in this application, including accompanying statements and transcripts are true, complete and correct. I understand that any false or misleading information in, or in connection with, my application may be cause for denial or loss of licensure.

Signature of Applicant (not valid unless signed by applicant)	Date