ED 172 REV. 2/20 C.G.S. 10-145 C.G.S. 10-145d Regs. 10-145d-414 CONNECTICUT STATE DEPARTMENT OF EDUCATION Bureau of Educator Standards and Certification P.O. Box 150471 Hartford, CT 06115-0471 www.ct.gov/sde/cert



APPLICATION FOR TEMPORARY 90-DAY CERTIFICATE

PART I: PERSONAL INFORMATION (Print all information in blue ink and in uppercase letters.)				
LAST NAME				
FIRST NAME	MI	GENDER		
SOCIAL SECURITY NUMBER B	IRTH DATE (Month-Day-Y	Year) - Required		
ADDRESS (Street)		Apt. #		
(City)		(State)		
(Zip Code)	FORMER LAST NAME(S)			
PHONE				
(Work)	Race/Ethnicity	 Native American Asian/Pacific Islander Black 		
E-MAIL ADDRESS	(Optional)	 White Hispanic 		
1. Have you ever been convicted of any crime, excluding minor traffic violation	ons? YES	NO NO		
2. Have you been dismissed for cause from any position?	YES	NO NO		
3. Have you ever surrendered a professional certificate, license, permit or othe (including, but not limited to, an education credential); had one revoked, sur		NO NO		

(including, but not limited to, an education credential); had one revoked, suspended, annulled, invalidated, rejected or denied for cause; or been the subject of any other adverse or disciplinary credential action?

Pursuant to Connecticut General Statutes Section 10-221d, the State Board of Education must submit, periodically, a database of applicants for an initial issuance of a certificate, authorization or permit to the State Police Bureau of Investigation for a criminal history record check. Each applicant seeking an initial issuance or renewal of a certificate, authorization or permit must also submit to a records check of the Department of Children and Families' child abuse and neglect registry established pursuant to Connecticut General Statutes Section 17a-101k. In addition, the State Board of Education is required to submit periodically for criminal history records check the database of all persons who hold any certificate, authorization or permit.

NOTE: If you answer "YES" to any of the above questions, you must attach a signed statement of explanation. If there are multiple incidents within each question, you must list and explain each separately. Submit official copies of court or administrative record(s), including disposition of each use.

Information on this application is subject to disclosure pursuant to the Freedom of Information Act.

ED 172

PART II: APPLICATION FOR TEMPORARY 90-DAY CERTIFICATE

1. Have you fulfilled the Praxis Core Academic Skills Test or waiver requirements?	YES	NO
2. Have you fulfilled the Praxis II and/or ACTFL requirements?	YES	NO

PART III: EDUCATIONAL BACKGROUND

List higher education institution(s) you attended. Attach a seperate sheet if you need additional space.

Names of Institutions	State	Dates AttendedFromTo(mm/yyyy)(mm/yyyy)	Degree/Major

ORIGINAL SIGNATURE OF APPLICANT

DATE:

PART IV: EMPLOYING AGENT REQUEST

I hereby request issuance of a temporary 90-day certificate for the aforementioned applicant to serve as indicated below. (Note: Dates must reflect 90 school days. The requested effective date cannot be prior to the date the application is received in our office.)

Endorsement Area	Grade	From (mm/dd/yyyy)	To (mm/dd/yyyy)
Check box if applicant is being employed in a:	(Check one)	Permanent Position	Substitute Position
	(Check one)	50% or more FTE	Less than 50% FTE

Please read and sign the following to acknowledge agreement to the terms listed below:

- The holder of the temporary 90-day certificate must be in the same position (same school/same classroom) for the entire validity period of the temporary 90-day certificate.
- Temporary 90-day certificates will be issued effective, the date the application (ED 172) is received in our office if the district neglects to submit the application prior to the candidate's first day of service and there are not enough days in the assignment (less than 90 school days), we will be unable to issue the temporary 90-day certificate and the district will need to default to requesting a long-term substitute authorization to cover the service. No exceptions will be made to this policy.
- If for any reason, the applicant fails to complete 90 school days consecutively under the 90-day certificate or the district does not retain the applicant for the full 90-days consecutively, the service cannot be banked or combined with other experiences/districts. No exceptions will be made to this policy.
- The certificate is not tranferable to any other school district. If the holder of a temporary 90-day certificate is released from employment prior to the expiration date of the temporary 90-day certificate, the time served will not count toward the issuance of the initial educator certificate. Notice of the release from employment is required, and the educator will need to serve 90-days under another temporary 90-day certificate to become eligible for an initial educator certificate.
- The holder of the temporary 90-day certificate must be evaluated a minimum of two times during the period of the 90-day certificate.

Signature of Superintendent/Exec. I (Original signature, no stamps acc	•	Date			
Typed or Printed Name of Person Signing Above		Title			
Board of Education*		Telephone Number			
Street		FAX Number			
City,	State, Zip Code	E-Mail Address			

*Board of Education means a Connecticut local or regional Board of Education, regional educational service center, unified school district, cooperative arrangement established pursuant to 10-158A of the Connecticut General Statutes, the Technical High School System, approved private special education facilities, the Gilbert School, Norwich Free Academy or Woodstock Academy.

Permanent means the position is indefinitely filled by the same person who is paid on the teacher salary schedule, provided with employee benefits and contributes to the Teachers' Retirement Board.

Substitute means a long-term substitute position that is filled by a person who takes the place of a permanent teacher for a defined period of time.

INSTRUCTIONS TO APPLICATION FOR INITIAL EDUCATOR CERTIFICATE FOR HOLDERS OF 90-DAY CERTIFICATES THIS CHECKLIST MUST BE ATTACHED TO THE COMPLETE APPLICATION PACKET

Applicant:

Г	a.	Complete	Parts	I,	Π	and	II.

- b. Attach official transcript(s), signed and sealed by the registrar(s).
- c. Attach ED 125 Statement of Preparing Higher Education Institution form signed by the Alternate Route to Certification Executive Director.
- d. Have fulfilled the Praxis Core Academic Skills Test and Praxis II or ACTFL requirements. (Please note: A 90-day certificate will not be issued until all assessment requirements have been met and notification is received from the appropriate testing agency.)
- e. Return completed application to the superintendent of schools.

Local Board of Education:

- a. Part IV is to be completed and signed by the superintendent of schools, executive director or designee.
- b. Return the completed application, attachments and checklist to the Bureau of Educator Standards and Certification.

CONNECTICUT ENDORSEMENT CODES AVAILABLE THROUGH THE ALTERNATE ROUTE TO CERTIFICATION (ARC)

- 015 English, 7-12 French, 7-12 018
- German, 7-12 019
- 020 Italian, 7–12
- 021 Latin, 7–12
- Russian, 7-12 022

- 023 Spanish, 7–12 Other World Language, 7–12 024
- 029 Mathematics, 7–12
- 030
- Biology 7-12 031
- Chemistry, 7-12 032
 - Physics, 7-12

- 033 Earth Science, 7–12 General Science, 7-12 034
- 042 Art, PK-12
- 045 Family and Consumer Sciences, PK-12
- 047 Technology Education, PK-12
- 049 Music, PK-12

Information on this application is subject to disclosure pursuant to the Freedom of Information Act.