ED 188 REV. 7/19 C.G.S. 10-145 C.G.S. 10-145d, P.A. 03-168 Regs. 10-145d-426

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 NONRENEWABLE ADULT EDUCATOR AUTHORIZATION

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

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.

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PART II: REQUEST FOR ADULT EDUCATOR AUTHORIZATION

Please ch	eck the appropriate box(es):					
	English to Speakers of Other Language – Endorsement 088					
	High School Credit Diploma Programs – Endorsement 106					
	External Diploma Program/Noncred	lit Mandated Programs (A	ABE, GED, EDP) – Endorsement 10)7		
	I have NOT completed the following	g assessment requirement	s:			
	PRAXIS I – PPST					
	PRAXIS II (Required for	Endorsement 106 ONL	Y)			
	ACTFL (Required for E	ndorsement 106 ONLY)				
PART I	II: APPLICANT ATTESTATIO	ON				
contains accurate.	ANT ATTESTATION: I certify that to no material misrepresentations, falsifi I understand that all application and on or omission may result in the deni	ications or omissions and accompanying information	that all of the information given by on may be verified and that any mat	me is true, erial misrep	complete and	
ORIGINA	AL SIGNATURE OF APPLICANT			DATE		
PART IV: EMPLOYING AGENT REQUEST AND SIGNATURE I request the issuance of a Nonrenewable Adult Educator Authorization for the applicant named on this application in the program(s) checked in Part II.						
	of Superintendent/Executive Directors of Superintendent/Executive Dire	or/Designee	Date			
Type or P	Printed Name of Person Signing Abov	ve .	Title			
District			Telephone Number			
Street			FAX Number			
City	State	Zip Code	E-Mail Address			

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INSTRUCTIONS TO APPLICATION FOR NONRENEWABLE ADULT EDUCATOR AUTHORIZATION

NOTE: Please use this form, if you meet all requirements for adult education certification except for assessments, to request a nonrenewable authorization to teach adult education. Applicants who have completed all requirements, including assessment requirements, must submit for ED 170. A fee is NOT required for this authorization.

	THIS CHECKLIST MUST BE ATTACHED TO THE COMPLETE APPLICATION PACKET
Applicant:	
a.	Complete Parts I, II and III.
b.	Attach official transcript(s), signed and sealed by the registrar(s), indicating the completion of a bachelor's degree. Official transcripts must include the embossed or colored seal of the university.
c.	Return completed application to the superintendent of schools.
Employing	Agent:
a.	Part IV is to be completed and signed by the superintendent of schools or designee.
b.	Return completed application, attachments and checklist to the Bureau of Educator Standards and Certification at the above address.