



APPLICATION FOR INITIAL DISTRICT OF COLUMBIA EDUCATOR LICENSE

This application is to be completed by individuals who are seeking issuance of an initial Teacher, School Support Personnel and/or School Administrator license. Please check the appropriate box for the type of license(s) you are seeking with this application.

Teacher

School Support Personnel

School Administrator

PART I – APPLICANT INFORMATION

Last Name:		First Name:		M.I.:
Maiden or other names used:				
Date of birth:	SSN:	Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female
Street:		City/State:		Zip Code:
Daytime contact#:	Evening contact#:	E-mail:		

PART II – APPLICANT BACKGROUND INFORMATION

1. Have you ever been charged or convicted of a felony or ANY crime involving children, dishonesty, or a controlled substance?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
2. Have you ever had any type of instructor, school support personnel, or administrator license denied, suspended, or revoked by any state?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
If yes, which State/Jurisdiction: _____, and what action was taken:	<input type="checkbox"/> Suspended	<input type="checkbox"/> Revoked	<input type="checkbox"/> Denied
3. Is any disciplinary action pending or currently in force against you or your educator’s license in any state or jurisdiction?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
If yes, in what state/jurisdiction: _____			
4. Have you ever been dismissed from any position due to immoral or unprofessional conduct?	<input type="checkbox"/> YES	<input type="checkbox"/> NO	

*If you answered ‘YES’ to any of these questions, you must attach a letter of explanation and/or a copy of the official court or hearing proceeding document(s) indicating the final judgment and current disposition of each offense. Failure to submit the requested documentation may cause your application to be returned to you unprocessed and/or denied for licensure.

PART III - APPLICANT EDUCATION INFORMATION

Name of College/University Attended	State	Degree Type	Degree Date	Degree Major or Program of Study

1.) Did you complete a state-approved licensure program in the subject area of the license(s) you are seeking? YES NO

2.) If YES, please indicate if the program was completed ‘In’ or ‘Outside’ of DC In DC Outside of DC

a) If you completed a program at an institution/organization operating IN the District of Columbia, please contact the certifying official or program coordinator at that institution to ensure that your licensure recommendation form has been forwarded to this office.

b) If you completed a program at an institution/organization operating OUTSIDE of the District of Columbia, you must attach an ‘Out-of-State Approved Program Verification’ form that has been completed by the certifying official of the School/College of Education or agency where your program was completed.

3.) Check the box for the DC exams taken, if any: Leadership: SLLA Basic Skills: PPST ACT SAT GRE
(You must attach the front and back pages of your official results) Specific Subject Area: Content Knowledge Pedagogy

PART IV – LIST THE SUBJECT AREA OF THE LICENSE YOU ARE SEEKING (a fee is required for each subject area requested)

1)	2)	3)
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PART V – APPLICANT CONSENT AND SIGNATURE

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

APPLICANT SIGNATURE:	DATE:
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There are different instructions for some items on the checklists below based on whether an applicant is an in-state or out-of-state applicant. These terms are defined as follows:

IN-STATE LICENSURE APPLICANT: Completed a state-approved teacher, school administrator and/or school support personnel licensure program in the District of Columbia

OUT-OF-STATE LICENSURE APPLICANT: Completed a state-approved teacher, school administrator and/or school support personnel licensure program outside of the District of Columbia, or completed coursework requirements at more than one college/university, and/or a college/university outside of the United States

APPLICATION PACKET DOCUMENTATION CHECKLIST

TEACHER LICENSURE APPLICANTS

- Fully completed application form bearing your original signature.
- 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 does not result in the issuance of a license.
- Official transcripts - **In-State Applicant:** Official transcript or student issued transcript sealed in a college/university envelope documenting completion of a Bachelor's Degree. We do recommend that all degree-bearing transcripts be submitted to our office so your licensure file includes all educational information regarding degrees granted.

Out-of-State Applicant: Official transcripts or student issued transcripts sealed in a college/university envelope from ALL institutions where a degree was earned and/or applicable coursework completed. **If you completed a degree or applicable coursework outside of the United States**, please visit www.naces.org for the list of approved foreign credential evaluation agencies. Your official foreign credential evaluation must be submitted to this office with your application packet, and must include the following:

1. A U.S. equivalency summary statement that includes the type of degree(s) earned, and the degree or program major completed; **AND**
2. A course-by-course listing that includes the number credit hours and the grade(s) earned for each course completed; **AND**
3. A statement of verification attesting to teaching credentials or licenses held abroad (if applicable).

Photocopies of transcripts, evaluations, and/or grade reports will not be accepted.

- Program Verification Form - In-State Applicant:** An In-State Program Verification and Licensure Recommendation Form must be filed with this office. Please contact the certifying official at the institution/organization where you completed your program to ensure that the form was forwarded to our office. If this form is not file, you may be required to completed additional requirements prior to being issued a DC license.

Out-of-State Applicant: An Out of State Approved Program Verification Form is required if you completed a state-approved educator licensure program at an institution or organization operating outside of DC. The form must be completed by a certifying official from the state-approved program, e.g., School/College of Education official or Approved Program Director/Designee, and sent to you to be included with your application packet. In instances where applicants completed programs that were not based at an institution of higher education and an official transcript was not issued, applicants must also submit an attachment to the out of state approved program verification form that includes a detailed description of program requirements that were completed. The description must be signed and dated by the program's certifying official, and must include a list of the requirements completed and coursework contact hours.

- Teacher Licensure Exams - In-State Applicant:** The In-State Program Verification and Licensure Recommendation Form submitted by your institution will document your score results. If you did not meet applicable testing requirements for some reason, our office will issue a licensure evaluation detailing outstanding testing requirements.

Out-of-State Applicant: Official Praxis, SAT, ACT and/or GRE score reports (all pages) for the applicable area(s), where required (printed PDF results are acceptable).

- An [original fingerprint supported nation-wide Criminal History Report](#) that has been issued within the previous 12 months. The report must be sealed in the official envelope mailed by the agency issuing the criminal history background report. **(Photo-copies and local-only criminal history reports will not be accepted).**

If you are employed with the D.C. Public Schools (DCPS), you may submit the official clearance letter issued by the DCPS Office of School Security – Fingerprinting/ID Badge Office, in lieu of the national criminal history report.

- A [copy of the front and back pages of your valid Level II full license*](#) that has been issued in another state/jurisdiction, where relevant.
- [Employment Verification Form](#) that documents previous, full-time teaching experience and has been signed and dated by your employing agency's Department or Office of Human Resources, where relevant.

***NOTE:** When seeking the issuance of a Regular II DC full teaching license based upon **the interstate agreement/reciprocity**, applicants **MUST** submit official documents verifying satisfactory completion of each requirement listed below at the time an application for initial licensure is submitted to this office. Failure to provide all applicable documents will require applicants to satisfy all coursework and licensure exams required by the District of Columbia.

1. **Completion of a state-approved teacher education program at an institution or organization located outside of the District of Columbia in the subject area matching the license being sought;**
2. **Possession of a valid out-of-state Level II license (full credential without deficiencies) in the subject area matching the license being sought;**
 - If you currently have a valid license from a state other than the state in which you completed a teacher preparation program, you must be able to demonstrate that you held a Level II license in the state in which you were prepared.
3. **Official score reports documenting successful completion of basic skills (Reading, Writing and Mathematics), content and pedagogy exams required in the state in which you were prepared.**
 - Applicants may either submit official test score reports that include pass/fail indications to serve as proof of meeting the state's licensure testing requirements, or request that the approved program provide state licensure testing verification on the Approved Program Verification form (required below).
 - DC will waive the pedagogy testing requirement for valid license holders who submit verification of three years of satisfactory full-time teaching experience (within the past seven years) in the licensure subject area.

SCHOOL SUPPORT PERSONNEL LICENSURE APPLICANTS

- [Fully completed application form](#) bearing your original signature.
- [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 does not result in the issuance of a license.
- [Official transcripts or student issued transcripts sealed in a college/university envelope](#) from ALL institutions where a degree was earned and/or applicable coursework completed. **If you completed a degree or applicable coursework outside of the United States**, please visit www.naces.org for the list of approved foreign credential evaluation agencies. Your [official foreign credential evaluation](#) must be submitted to this office with your application packet, and must include the following:
 1. A U.S. equivalency summary statement that includes the type of degree(s) earned, and the degree or program major completed; **AND**
 2. A course-by-course listing that includes the number credit hours and the grade(s) earned for each course completed; **AND**

3. A statement of verification attesting to teaching credentials or licenses held abroad (if applicable).

Photocopies of transcripts, evaluations, and/or grade reports will not be accepted.

- Program Verification Form - In-State Applicant:** An [In-State Program Verification and Licensure Recommendation Form](#) must be filed with this office. Please contact the certifying official at the institution/organization where you completed your program to ensure that the form was forwarded to our office. If this form is not file, you may be required to completed additional requirements prior to being issued a DC license.

Out-of-State Applicant: An [Out of State Approved Program Verification Form](#) is required if you completed a state-approved educator licensure program at an institution or organization operating outside of DC. The form must be completed by a certifying official from the state-approved program, e.g., School/College of Education official or Approved Program Director/Designee, and sent to you to be included with your application packet.

- An [original fingerprint supported nation-wide Criminal History Report](#) that has been issued within the previous 12 months. The report must be sealed in the official envelope mailed by the agency issuing the criminal history background report. ***(Photo-copies and local-only criminal history reports will not be accepted).***

If you are employed with the D.C. Public Schools (DCPS), you may submit the official clearance letter issued by the DCPS Office of School Security – Fingerprinting/ID Badge Office, in lieu of the national criminal history report.

- SCHOOL LIBRARIAN APPLICANTS ONLY:** If you did not complete directed field experience in a school library/media center as evidenced by an official transcript, you must submit an [Employment Verification Form](#) that documents two (2) years of full-time teaching experience or one (1) year of library experience. The form must be signed and dated by your employing agency's Department or Office of Human Resources.
- SCHOOL SOCIAL WORKER APPLICANTS ONLY:** A copy of your [valid license to practice Social Work in the District of Columbia](#), issued by the DC Department of Health.

[SCHOOL ADMINISTRATOR LICENSURE APPLICANTS](#)

- [Fully completed application form](#) bearing your original signature.
- [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 does not result in the issuance of a license.
- [Official transcripts or student issued transcripts sealed in a college/university envelope](#) from ALL institutions where a degree was earned and/or applicable coursework completed. **If you completed a degree or applicable coursework outside of the United States**, please visit www.naces.org for the list of approved foreign credential evaluation agencies. Your [official foreign credential evaluation](#) must be submitted to this office with your application packet, and must include the following:
4. A U.S. equivalency summary statement that includes the type of degree(s) earned, and the degree or program major completed; **AND**
 5. A course-by-course listing that includes the number credit hours and the grade(s) earned for each course completed; **AND**
 6. A statement of verification attesting to teaching credentials or licenses held abroad (if applicable).
Photocopies of transcripts, evaluations, and/or grade reports will not be accepted.
- Program Verification Form - In-State Applicant:** An [In-State Program Verification and Licensure Recommendation Form](#) must be filed with this office. Please contact the certifying official at the institution/organization where you completed your program to ensure that the form was forwarded to our office. If this form is not file, you may be required to completed additional requirements prior to being issued a DC license.

Out-of-State Applicant: An [Out of State Approved Program Verification Form](#) is required if you completed a state-approved educator licensure program at an institution or organization operating outside of DC. The form must be completed by a certifying official from the state-approved program, e.g., School/College of Education official or Approved Program

Director/Designee, and sent to you to be included with your application packet. In instances where applicants completed programs that were not based at an institution of higher education and an official transcript was not issued, applicants must also submit an attachment to the out of state approved program verification form that includes a detailed description of program requirements that were completed. The description must be signed and dated by the program's certifying official, and must include a list of the requirements completed and coursework contact hours.

- **School Administrator Licensure Exams - In-State Applicant:** The [In-State Program Verification and Licensure Recommendation Form](#) submitted by your will document your score results. If you did not meet applicable testing requirements for some reason, our office will issue a licensure evaluation detailing outstanding testing requirements.

Out-of-State Applicant: [Official Praxis School Leadership Licensure Assessment* score report \(all pages\)](#). Printed PDF results are acceptable.

- An [original fingerprint supported nation-wide Criminal History Report](#) that has been issued within the previous 12 months. The report must be sealed in the official envelope mailed by the agency issuing the criminal history background report. ***(Photo-copies and local-only criminal history reports will not be accepted)***.

If you are employed with the D.C. Public Schools (DCPS) agency, you may submit the official clearance letter issued by the DCPS Office of School Security – Fingerprinting/ID Badge Office, in lieu of the national criminal history report.

- [Employment Verification Form](#) that documents two years of full-time Preschool-12 school-based teaching experience or other instructional leadership experience, or two years of full-time Preschool-12 school-based experience in guidance counseling, social work, psychological services. The form must be signed and dated by your employing agency's Department or Office of Human Resources.

PLEASE BE ADVISED THAT ONLY COMPLETE APPLICATION PACKETS WILL BE ACCEPTED BY THIS OFFICE. INDIVIDUAL OR SEPARATE DOCUMENTS SENT TO THIS OFFICE SHALL BE DISCARDED OR SENT BACK TO THE SENDER IF KNOWN. INCOMPLETE APPLICATIONS WILL BE RETURNED TO SENDER UNPROCESSED.

PLEASE NOTE THAT THIS OFFICE DOES NOT MAKE COPIES OF DOCUMENTS SUBMITTED WITH YOUR APPLICATION. YOU MUST REQUEST ADDITIONAL TRANSCRIPTS, TEST SCORE REPORTS OR OTHER OFFICIAL DOCUMENTS FROM THE ISSUING ENTITY AND/OR MAKE COPIES of the DOCUMENTS THAT ARE NOT REQUIRED TO BE SEALED IN AN OFFICIAL ENVELOPE PRIOR TO SUBMITTING YOUR APPLICATION PACKET WITH THIS OFFICE.

Submit 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: educator.licensurehelp@dc.gov