

Teacher Preparation and Certification Status Form

Use this form if either of the following applies:

- Applicant completed teacher preparation outside of Louisiana and is applying for a Louisiana teaching certificate.
- Applicant earned a degree in education, but is seeking certification via a Louisiana alternative program due to the degree not being a teacher preparation program.

Educator Information – To be completed by the educator as your information appears on your Louisiana certification application	
Name: <i>(First) (Middle) (Last)</i>	SSN:
Address: <i>(Street Address) (City) (State) (Zip code)</i>	
Email Address:	Date of Birth:
<i>I hereby permit the release of this information concerning my certification status to the Louisiana Department of Education. I agree that my electronic signature as entered below is the legal equivalent of my manual signature on this application.</i>	
Educator Signature:	

***** EDUCATOR STOP HERE *****

Teacher Preparation Program and Certification Information – To be completed by the teacher preparation program provider, university, college, or credentialing agency				
1. Indicate the type of teacher preparation program completed and date of completion: <div style="display: flex; justify-content: space-around;"> Traditional/undergraduate program Alternative/post baccalaureate program </div> Date of program completion:				
2. Did the applicant complete student teaching, internship, or teaching residency? If “no” please explain what requirements were met in lieu of the student teaching, internship, or teaching residency. <div style="display: flex; justify-content: space-around;"> YES NO, and explain: </div>				
3. Was the applicant eligible for certification in your state at the completion of the teacher preparation program? Check “Yes” or “No” and complete requested details.				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">YES, and indicate subject and grade levels for-</td> </tr> <tr> <td style="padding: 5px;">• initial program area:</td> </tr> <tr> <td style="padding: 5px;">• additional teaching endorsements:</td> </tr> </table>		YES, and indicate subject and grade levels for-	• initial program area:	• additional teaching endorsements:
YES, and indicate subject and grade levels for-				
• initial program area:				
• additional teaching endorsements:				
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;">NO, and indicate deficiency, including what initial program area was teacher candidate pursuing-</td> </tr> <tr> <td style="padding: 5px;">• deficiencies:</td> </tr> <tr> <td style="padding: 5px;">• initial program area:</td> </tr> </table>		NO, and indicate deficiency, including what initial program area was teacher candidate pursuing-	• deficiencies:	• initial program area:
NO, and indicate deficiency, including what initial program area was teacher candidate pursuing-				
• deficiencies:				
• initial program area:				
Name of Program Provider, College, University, or Credentialing Agency providing verification:				
Address: <i>(Street Address) (City) (State) (Zip code)</i>				
Telephone Number:	Email Address:			
<i>My typed signature attests that the above information is true and accurate to the best of my knowledge. I agree that my electronic signature as entered below is the legal equivalent of my manual signature.</i>				
Signature and Title:	Date:			