

WORLD LANGUAGE CERTIFICATE (WLC) PK-12 APPLICATION

The World Language PK-12 Certification (WLC), formerly known as the Foreign Language Special Certificate (FLS/FLES), is granted to applicants holding degrees and credentials from another country in a specialized language, elementary grades, middle grades, and/or secondary grades who are participating in the Louisiana Department of Education (LDOE) Foreign Associate Teacher Program. A WLC certificate allows one to teach world language and/or immersion in grades PK-12.

The Louisiana employing school system or the LDOE's World Languages Office must submit the request for the initial WLC certificate.

The WLC certificate is **valid for six years** and is renewable by successfully meeting the standards of effectiveness for at least three years during the six-year initial or renewal period pursuant to state law and Bulletin 130. The Louisiana employing school system must request renewal of a WLC certificate. **The employer is to use the experience verification form where they would sign in recommendation of the renewal.** Educators holding Foreign Language Special certificates under previous certification structures (FLS/FLES) will be transitioned to the WLC in accordance with current policy.

The [LDOE's World Languages Office](#) will review credentials to determine eligibility in alignment with current policy as outlined in [Bulletin 746](#) and make the recommendation to the Certification Office for issuance or renewal.

Educators may transition to the professional Level 1 certificate after successful completion of the exams for the certification area defined in the [Louisiana PRAXIS Score Requirements](#) chart and Bulletin 746. The employing school system would use the "Certification Renewal, Higher, and Status Change (RH)" application to request the Level 1. The application forms can only be accessed by a verified Human Resources portal user.

A foreign language teacher in a certified foreign language immersion program who cannot be certified or issued a license to teach through the board's Foreign Associate Teacher Program may be allowed to teach without passing the required examination, provided the teacher has at least a baccalaureate degree and complies with state laws regarding a criminal background check.

Submitting application: The Louisiana employing school system or the LDOE's World Languages Office submits the following items as a single PDF file through the [online educator certification portal](#). The following items are required as part of a complete application packet and must be signed and dated with current date:

1. **Copy of Applicant Social Security Card -and- Driver's License/State ID** (these are required with every application)
2. **Application** form with all information provided, signed and dated within 90 days of submission
3. **Professional Conduct** form with all questions answered, signed, and dated by the applicant within 90 days of submission
4. **Copy of degree transcript** indicating an earned bachelor's degree in education or equivalent preparation program in education from a foreign country or higher level degree. The status of the degree will be determined by LDOE's World Languages Office. If the LDOE staff cannot make a determination of degree equivalency, credentials must be submitted to a credentialing agency that is an endorsed member or a member in good standing with either the [National Association of Credential Evaluation Services \(NACES\)](#) or the [Association of International Credential Evaluators \(AICE\)](#) for evaluation with the original course-by-course evaluation including a statement verifying the US comparability of the baccalaureate or graduate degree.
5. **Copy of teaching certificate** issued in applicant's native country
6. **Experience Verification** form completed/signed by the Louisiana employing school system

No Application fee is required for this type of certificate.

When the completed application package has been submitted to the Certification Office it will be sent to the LDOE's World Languages Office to make a determination regarding eligibility for a Louisiana WLC certificate.

All applications will be processed in the order in which they are received. The status of a certification application can be verified [online HERE](#).

Handwritten documents will not be accepted for certification processing.

Social Security Number _____ (no dashes, no spaces)	Email Address: _____
Legal Name of Applicant: _____ Date of Birth: _____	
Address: _____ <div style="display: flex; justify-content: space-between; font-size: small;"> (Street) (City) (State) (Zip Code) </div>	
Phone: (____) _____ LA Certificate #: _____	

Requested Certification Transaction:
Educational Qualifications *(must be documented with transcript/equivalency transcript):*

Degree(s) Earned	Institution(s)	Date Degree(s) Earned

Certification Requested in which Language:
Certification Area (check all that apply):

WLC – Language Only	WLC – Immersion PK to 8	WLC Immersion – 6 to 12
Elementary: PK - 5	Elementary: PK - 5	Secondary: Math
Middle School: 6 - 8	MS: 6 – 8 Math	Secondary: Science _____
Secondary Grades: 6-12	MS: 6 – 8 Social Studies	Secondary: Social Studies
	MS: 6 – 8 Science	Secondary: Language Arts
	MS: 6 – 8 Language Arts	

Type of Certificate held in native country: _____

Subject
Year of Issuance

I agree that my electronic signature as entered below is the legal equivalent of my manual signature on this application.

Signature of Applicant

Date
For use by the LDOE's World Languages Office:

I certify that the above information is complete and correct according to the records on file in this office.

I agree that my electronic signature as entered below is the legal equivalent of my manual signature on this application.

 LA Dept. of Education's World Languages Specialist

Date

APPLICANT'S LEGAL NAME:	SSN (No Dashes):
ADDRESS (Street Address, Including City, State, Zip):	DATE OF BIRTH (MM/DD/YYYY):

ANSWER <u>ALL</u> QUESTIONS	Check	
	YES	NO
1. Have you ever had a professional license or certificate denied, suspended, revoked, censured, or voluntarily surrendered? If YES , what type of professional license/certificate? _____ If YES , in which state? _____		
2. Are you currently being reviewed or investigated for purposes of such action as stated in #1 or is such action pending?		
3. Have you ever been convicted of a criminal offense? If YES , when was the date of conviction: _____		

If you answered “**YES**” to any of the questions above, you must provide copies of any proceedings or other relevant explanatory documents that provide full disclosure of the nature and circumstances of **EACH** separate incident to be included with the application packet.



Pursuant to Louisiana law R.S. 15:587.1, background checks shall disclose **ALL CONVICTIONS**, (Including but not limited to expungements, first offender pardons and pre-trial diversion). Criminal Background Checks (CBCs) are conducted in accordance with La. R.S. 17:15 and La. R.S. 15:587.1.

BESE policy set forth in [Bulletin 746-Louisiana Standards for State Certification of School Personnel](#) addresses actions related to the suspension, denial, and revocation of Louisiana Certificates.

<i>I affirm and declare that all information given by me in the responses to items #1 through #3 above is true, correct, and complete to the best of my knowledge. I understand that any misrepresentation of facts, by omission or addition, may result in criminal prosecution and/or the denial or revocation of my teacher certificate. I agree that my electronic, typed signature as entered below is the legal equivalent of my manual signature on this document.</i>	
SIGNATURE OF APPLICANT:	DATE SIGNED:



IN-STATE EXPERIENCE VERIFICATION FORM

This document is to be completed by a **Louisiana employing school system –or– BESE-approved contracted company** as official verification of the applicant’s experience.

Handwritten documents are not accepted for certification processing.

EMPLOYEE'S LEGAL NAME:	DATE OF BIRTH (MM/DD/YYYY):	SSN (No Dashes):
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LA School System (Out of State Experience must be verified on form linked here)	NAME OF SCHOOL	Type of School	Dates of Service MM/YYYY-MM/YYYY (e.g. 08/2018-06/2020 –or– 08/2019 – current)	Grade Level(s)	Subject Taught or Service Provided	Employee’s Role/Job Title (e.g. Teacher, Substitute, Principal, District Leader, etc.) If role is unique, include a job description.	Method of Evaluation <ul style="list-style-type: none">Compass/LEADSLocal EvaluationEmployer EvaluationCannot Be Evaluated – include a job description
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I agree & verify the information contained in this document. My electronic signature, as entered below, is the legal equivalent of my manual signature on this application.

SIGNATURE OF APPLICANT:	
SIGNATURE & TITLE OF EMPLOYING AUTHORITY:	DATE VERIFIED:
NAME OF DISTRICT/COMPANY OF EMPLOYING AUTHORITY:	EMPLOYER’S E-MAIL: