

## NONPUBLIC TEMPORARY (T) CERTIFICATION APPLICATION

Louisiana offers the Non-public Temporary (T) certificate to teachers practicing in a nonpublic school setting who need temporary credentialing to meet nonpublic school standards as outlined in <u>Bulletin 741 (Non-public)</u>, <u>Louisiana Handbook for School Administrators</u>.

The T certificate is valid for one year and is renewable while the holder works towards meeting nonpublic school standards. Once the teacher fulfills non-public standards, the non-public school reports the teacher as "meeting non-public standards," but **no additional certificate is issued**. If continuous, renewable, standard certification is needed, then the applicant will need to fulfill requirements to enroll into an <u>alternative certification program</u>.

**Eligibility Requirements** - Applicant must be employed in a Louisiana non-public, private, parochial, or diocesan school and have a bachelor's degree from a college/university <u>accredited in accordance with 34 CFR 602</u>.

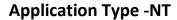
**Renewal Requirements** - Certificate holder must earn six semester hours of professional coursework annually. Coursework should address the needs of the regular and exceptional child, such as: child/adolescent development/psychology; educational psychology; the learner with special needs; classroom organization and management; multicultural education.

The employing nonpublic, private, parochial school, or diocesan system human resource office will submit a complete application packet (including required documentation) by uploading it through the online <u>educator certification portal</u>. The following are submitted as part of a complete application:

- 1. Copy of Applicant's Social Security Card & Driver's License/Official Photo ID (required with every application)
- 2. Nonpublic Temporary (T) Application form
- 3. Professional Conduct form with all questions answered, signed, and dated by the applicant
- 4. Official transcripts should be sent (mailed or emailed) directly to you or your employing school system and will be considered official when scanned and/or uploaded to the online certification portal. Check that the degree is indicated as awarded/conferred with date.
- 5. Copy of Online Payment Confirmation email or screenshot Use Processing Fee Schedule to determine amount due. Payment is non-refundable and does not guarantee certification but is used for review of submitted documents. Guide the educator to their TeachLA Live! portal account so that the fee, appropriate to the request, can be made to LDOE online through the payment portal. Inform the educator that the email confirmation or payment success screen is required to be included with the application. The confirmation number alone is not accepted. Applications that do not include the email confirmation or payment success screen will be returned without processing.

**Contact Information:** All questions regarding certification requirements or the certification process, can be answered by contacting a Louisiana Department of Education certification specialist through the online <u>educator certification portal</u>.

All applications will be evaluated in the order in which they are received. You can check the <u>status of your certification application online</u>.





(no dashes, no spaces)

## Handwritten documents will not be accepted for certification processing.

Social Security Number Email Address:

Legal Name of Applicant: Date of Birth:				
Check here if requesting name char	nge; will match name as it appears on	SS card.		
Address:				
(Street)	(City)	(State)	(Zip Code)	
Phone: ()	_ LA Certificate #:	Payment Confirmation # (Provide email confirmation or screenshot of payment with documents)		
Indicate Certification Request	:			
Louisiana Employing School S	System:			
Certification Area Requested	(as listed in Bulletin 746):			
EDUCATIONAL QUALIFICA	TIONS (must be documente	ed with transcript/e	equivalency transcript)	
Degree(s) Earned	Institution(s	s)	Date Degree(s) Earned	
	qualified person for employmen	t in the position her	nilable for this position and that the ein above described. <i>I agree that my his application</i> .	
Signature of Employing Schoo	l System	Date		
I hereby certify that I have been inf electronic signature as entered below			erstand all guidelines. I agree that my is application.	
Signature of Applicant		Date		
	stem is to provide a copy of		outlined in Bulletin 741 (Non-publi	

regarding meeting nonpublic standards or information regarding admission into an alternate certification program

at the time of initial application and for each renewal.



APPLICANT'S LEGAL NAME:

ADDRESS (Street Address, Including City, State, Zip):

## **Professional Conduct Form**

DATE OF BIRTH (MM/DD/YYYY):

SSN (No Dashes):

	ANSWER <u>ALL</u> QUESTIONS	Che YES	eck 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	B. Have you ever been convicted of a criminal offense?				
	If YES, when was the date of conviction:				
you answered "YES" to any of the questions above, you must provide copies of any proceedings rother relevant explanatory documents that provide full disclosure of the nature and circumstances f EACH separate incident to be included with the application packet.  Pursuant to Louisiana law R.S. 15:587.1, background checks shall disclose ALI 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.					
	E policy set forth in <u>Bulletin 746-<i>Louisiana Standards for State Certification of School Per</i></u> ons related to the suspension, denial, and revocation of Louisiana Certificates.	<u>'sonnel</u> ac	ldresses		
	ffirm and declare that all information given by me in the responses to items #1 through #3 above				
	d complete to the best of my knowledge. I understand that any misrepresentation of facts, by omiss				
-	y result in criminal prosecution and/or the denial or revocation of my teacher certificate. I agree that and signature as entered below is the legal equivalent of my manual signature on this document.	t my electr	ronic,		
	ed signature as entered below is the legal equivalent of my manual signature on this document.  GNATURE OF DATE SIGNED:				
	PLICANT:				