



APPLICATION FOR EXTENSION OF SUBSTITUTE TEACHER AUTHORIZATION BEYOND THE 40-DAY LIMIT

PART I: PERSONAL INFORMATION (Print all information in blue ink and in uppercase letters.)

Grid of boxes for LAST NAME

LAST NAME

Grid of boxes for FIRST NAME

FIRST NAME

MI box

MI

GENDER box

GENDER

Grid of boxes for SOCIAL SECURITY NUMBER

SOCIAL SECURITY NUMBER

Grid of boxes for BIRTH DATE

BIRTH DATE (Month-Day-Year) - Required

Grid of boxes for ADDRESS (Street)

ADDRESS (Street)

Grid of boxes for Apt. #

Apt. #

Grid of boxes for City

(City)

Grid of boxes for State

(State)

Grid of boxes for Zip Code

(Zip Code)

FORMER LAST NAME(S)

Grid of boxes for PHONE (Home)

PHONE (Home)

Grid of boxes for PHONE (Work)

(Work)

Race/Ethnicity

(Optional)

- 1. Native American
2. Asian/Pacific Islander
3. Black
4. White
5. Hispanic

E-MAIL ADDRESS

- 1. Have you ever been convicted of any crime, excluding minor traffic violations?
2. Have you been dismissed for cause from any position?
3. Have you ever surrendered a professional certificate, license, permit or other credential...

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.

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.



**PART II: EDUCATIONAL BACKGROUND**

1. List all education you have completed, including high school, trade-related vocational school and/or other postsecondary schooling.

NAME OF INSTITUTION	STATE	DATES ATTENDED		MAJOR FIELD OF STUDY	DEGREE AWARDED
		From (M/Y)	To (M/Y)		

- 2. If a bachelor’s degree is required for the subject(s) and grade level(s) of the substitute teaching assignment(s), official transcripts are attached verifying the completion of the required bachelor’s degree and 12 semester hours of credit in the area(s) requested.
- 3. If this request is for an occupational or trade-related subject for which a bachelor’s degree is not required, you must attach verification of eight years of appropriate occupational experience. Verification of experience must be submitted on company letterhead. If you are self-employed, we will accept a notarized statement and photocopies of tax records.

**PART III: APPLICANT ATTESTATION**

I certify that the information provided by me on this application and any accompanying documents contains no material misrepresentations, falsifications or omissions and that all of the information given by me is true, complete and accurate. I understand that all application and accompanying information may be verified and that any material misrepresentation, falsification or omission may result in the denial or revocation of my certificate(s), permit(s) or authorization(s).

ORIGINAL SIGNATURE OF APPLICANT  DATE:

**PART IV: EMPLOYING AGENT INFORMATION**

1. Indicate the subject(s) and grade level(s) of the substitute teaching assignment(s), including occupational or trade-related subjects for which a bachelor’s degree is not required.

Subject \_\_\_\_\_ Grade Level \_\_\_\_\_ Subject \_\_\_\_\_ Grade Level \_\_\_\_\_

- 2. Attach a letter documenting steps taken by the board of education to secure a certified candidate suitable for this position. Please indicate the number of certified applicants who applied for this position and identify the reasons why a certified candidate was not hired. Additionally, indicate any circumstances and conditions which make this position particularly difficult to staff.
- 3. List and attach a copy of the specific location and dates of newspaper advertisements, vacancy notices, university postings, teacher agency contacts, Internet job postings, etc.

**PART V: EMPLOYING AGENT ATTESTATION**

I am requesting an extension of substitute teacher authorization beyond the 40-day limit for the candidate listed on this application. I understand that, if approved, this candidate may serve in this position until June 30 of the current school year.

\_\_\_\_\_  
Signature of Superintendent, Executive Director or designee  
attesting to the accuracy of information  
**(Original signature, no stamps accepted)**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed or Printed Name of Person Signing Above

\_\_\_\_\_  
Title

\_\_\_\_\_  
District

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Street

\_\_\_\_\_  
FAX Number

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
E-Mail Address

*Original Signatures Must Be On Form Submitted*



**ED 175**  
REV. 12/18  
C.G.S. 10-145  
C.G.S. 10-145d, P.A. 03-168  
Regs. 10-145d-420

**CONNECTICUT STATE DEPARTMENT OF EDUCATION**  
**Bureau of Educator Standards and Certification**  
**P.O. Box 150471**  
**Hartford, CT 06115-0471**  
[www.ct.gov/sde/cert](http://www.ct.gov/sde/cert)

**INSTRUCTIONS TO APPLICATION FOR EXTENSION OF SUBSTITUTE TEACHER  
AUTHORIZATION BEYOND THE 40-DAY LIMIT**

**THIS CHECKLIST MUST BE ATTACHED TO THE COMPLETE APPLICATION PACKET**

Listed below are the required documents which must be submitted to the Bureau of Educator Standards and Certification to process your request for a Substitute Teacher Authorization Beyond the 40-Day Limit. This authorization will expire on June 30 of the school year during which it was approved.

**Applicant:**

- a. Complete Parts I and II.
- b. Attach official transcript(s), signed and sealed by the registrar(s), indicating the completion of a bachelor's degree and a minimum of 12 semester hours of credit in the area(s) requested. Official transcripts must include the embossed or colored seal of the college or university.
- c. Return completed application to the superintendent of schools, executive director or designee.

**Employing Agent:**

- a. Complete Parts IV and V and mail application and supporting documentation to the Bureau of Educator Standards and Certification at the above address.

**FOR OFFICE USE ONLY**

The person named on this application  is authorized  is NOT authorized to serve as a substitute teacher for the board of education listed on page 2.

Authorized Signature: \_\_\_\_\_

Date: \_\_\_\_\_