



**APPLICATION FOR SUBSTITUTE TEACHER AUTHORIZATION
FOR CANDIDATES WHO HAVE NOT COMPLETED A BACHELOR'S DEGREE**

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

LAST NAME

FIRST NAME

MI

GENDER

- -

SOCIAL SECURITY NUMBER

- -

BIRTH DATE (Month-Day-Year) - **Required**

ADDRESS (Street)

Apt. #

(City)

(State)

-

(Zip Code)

FORMER LAST NAME(S)

PHONE - -

(Home)

- -

(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? YES NO
2. Have you been dismissed for cause from any position? YES NO
3. Have you ever surrendered a professional certificate, license, permit or other credential (including, but not limited to, an education credential); had one revoked, suspended, annulled, invalidated, rejected or denied for cause; or been the subject of any other adverse or disciplinary credential action? YES NO

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. Each applicant seeking an initial issuance or renewal of a certificate, authorization or permit must also submit to a records check of the Department of Children and Families' child abuse and neglect registry established pursuant to Connecticut General Statutes Section 17a-101k. In addition, the State Board of Education is required to submit periodically for criminal history records check the database of all persons who hold any certificate, authorization or permit.

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. Submit official copies of court or administrative record(s), including disposition of each use.



PART II: EDUCATIONAL BACKGROUND

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

NAME OF SCHOOL	STATE	DATES ATTENDED		EDUCATION LEVEL COMPLETED (H.S. Diploma, GED, Assoc. Degree)
		From (M/Y)	To (M/Y)	

List **ALL** substitute teaching experience or any other experiences you have had working with school-age children, along with any unique qualifications for the substitute position. (Please attach your resume, or a separate sheet, if necessary.)

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).

By checking the "I Agree" box, you agree your typed signature is the legal equivalent of your manual signature on this Application.

I Agree.

ORIGINAL SIGNATURE OF APPLICANT: DATE:

PART IV: EMPLOYING AGENT INFORMATION AND ATTESTATION

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
Street	FAX Number
City, State, Zip Code	E-mail 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: _____

Original Signatures Must Be On Form Submitted



ED 174
REV. 7/19
C.G.S. 10-145, P.A. 11-27
C.G.S. 10-145d
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

**INSTRUCTIONS TO APPLICATION FOR SUBSTITUTE TEACHER AUTHORIZATION
FOR CANDIDATES WHO HAVE NOT COMPLETED A BACHELOR'S DEGREE**

THIS CHECKLIST MUST BE ATTACHED TO THE COMPLETE APPLICATION PACKET

List 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 for candidates who have NOT completed a bachelor's degree. This authorization will expire on June 30 of the school year during which it was approved.

Applicant:

- a. Complete Parts I and II.
- b. Return completed application to the superintendent of schools, executive director or designee.

Employing Agent:

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

Information on this application is subject to disclosure pursuant to the Freedom of Information Act.