



APPLICATION TO REMOVE
COURSE WORK DEFICIENCY AND/OR ASSESSMENT DEFERRAL

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

[Grid of 20 boxes for last name]

LAST NAME

[Grid of 15 boxes for first name]

FIRST NAME

[Box for MI]

MI

[Box for Gender]

GENDER

[Grid of 9 boxes for Social Security Number]

SOCIAL SECURITY NUMBER

[Grid of 7 boxes for Birth Date]

BIRTH DATE (Month-Day-Year) - Required

[Grid of 20 boxes for Address]

ADDRESS (Street ONLY no P.O. Box)

[Grid of 4 boxes for Apt. #]

Apt. #

[Grid of 15 boxes for City]

(City)

[Grid of 2 boxes for State]

(State)

[Grid of 5 boxes for Zip Code]

(Zip Code)

FORMER LAST NAME(S) Required

[Grid of 12 boxes for Home Phone]

PHONE

(Home)

[Grid of 12 boxes for Work Phone]

(Work)

Race/Ethnicity

[Box for Race/Ethnicity]

(Required)

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 case.

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: _____

Original Signatures Must Be On The Form Submitted

ED 184
REV. 7/19
C.G.S. 10-145
C.G.S. 10-145d, P.A. 03-168

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 TO REMOVE
COURSE WORK DEFICIENCY AND/OR ASSESSMENT DEFERRAL**

Applicant:

- a. Complete application on the reverse side.
- b. To remove a course work deficiency, an official transcript which includes the embossed or colored seal of the issuing college or university.
- c. To remove an assessment deferral, contact the appropriate testing agency and request that this testing agency forward your official test scores to the Bureau of Educator Standards and Certification. If the PRAXIS I or II Assessment was completed outside of Connecticut, please indicate Connecticut's score recipient code of R7050.
- d. Return completed application with required documents/information to the Bureau of Educator Standards and Certification.