ED 185 REV. 1/23 C.G.S. 10-145 C.G.S. 10-145d C.G.S. 10-149 Regs. 10-145d-423

CONNECTICUT STATE DEPARTMENT OF EDUCATION Bureau of Educator Standards and Certification P.O. Box 150471 Hartford, CT 06115-0471



www.ct.gov/sde

APPLICATION FOR FIVE-YEAR RENEWABLE COACHING PERMIT

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

LAST NAME					
FIRST NAME			MI		GENDER
SOCIAL SECURITY NUMBER		BIRTH DAT	E (Month-Day-	Year)	- Required
ADDRESS (Street)					Apt. #
(City)			(State)		
(Zip Code)	-	FORMER	LAST NAME(S	5)	
PHONE	-				
(Home)	_	I	Race/Ethnicity	1. 2.	Native American Asian/Pacific Islander
(Work) E-MAIL ADDRESS _			(Required)	3. 4. 5.	Black White Hispanic
1. Have you ever been convicted of any crime, excluding minor traffic violations?		ions?	YES		NO
2. Have you been dismissed for cause from any position?			YES		NO
(including, but no annulled, invalida	rrendered a professional certificate, license, permit or oth t limited to, an education credential); had one revoked, s ted, rejected or denied for cause; or been the subject of a inary credential action?	uspended,	l 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: COMPLETION OF REQUIRED FIRST AID COURSE

The first aid course must have been completed within 3 years prior to the photocopy of both the front and back of the first aid card, or (2) original or		d and attach: (1) a
Name of course completed	Date of completion	
Please Note: CPR and first aid courses completed in an "online-only" for	•	
PART III: COMPLETION OF REQUIRED CPR COURSE		
Please sign your valid CPR card and attach: (1) a photocopy of both the f completion, to this application.	ront and back of the CPR card, or (2) original cer	rtificate of
Name of course completed	Date of completion	
Please Note: CPR and first aid courses completed in an "online-only" for	mat cannot be accepted for a coaching permit.	
PART IV: HIGH SCHOOL INFORMATION		
Please attach a copy of your high school diploma or official high school t	ranscript to this application.	
PART V: CONCUSSION AND HEAD INJURY TRAINING I	REQUIREMENT	
Attach the original certificate of completion of the concussion and head in Coaching Education Program (CCEP).	njury training requirement (Module 15) from the	Connecticut
PART VI: COMPLETION OF REQUIRED COACHING CO	DURSE	
(For individuals NOT holding a valid Connecticut educator certificat	e, or a standard or permanent certificate)	
Course completed at:	Date course completed:	
Course completed at: (Name of college/university or board of education)	<u> </u>	
PART VII: RENEWAL OF FIVE-YEAR RENEWABLE COA	CHING PERMIT	
Have you completed at least 15 clock hours of seminars, course work or information on safe and healthful coaching practices and understanding cas approved by the State Department of Education?		NO
On or after July 1, 2010, through June 30, 2015, completion of the concurconnecticut Coaching Education Program (CCEP).	ssion and head injury training requirement (Mod	ule 15) from the
After July 1, 2015, completion of the refresher course completed through	the CCEP.	
PART VIII: APPLICANT ATTESTATION		
I certify that the information provided by me on this application and any falsifications or omissions and that all of the information given by me is t accompanying information may be verified and that any material misreprevocation of my certificate(s), permit(s) or authorization(s).	rue, complete and accurate. I understand that all	application and
ORIGINAL SIGNATURE OF APPLICANT:	DATE:	

ED 185A REV. 7/19 C.G.S. 10-145 C.G.S. 10-145d C.G.S. 10-149 C.G.S. 10-149b Regs. 10-145d-423

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INSTRUCTIONS TO APPLICATION FOR FIVE-YEAR RENEWABLE COACHING PERMIT

Listed below are the required documents which must be submitted to the Bureau of Educator Standards and Certification to process your request for the issuance or renewal of a Five-Year Renewable Coaching Permit.

For the ISSUANCE of a Five-Year Renewable Coaching Permit you must complete and submit the following:

Applicant:					
1		If you do NOT hold a valid Connecticut educator certificate, or a standard or permanent certificate, please complete sections a through g of the instructions below.			
2	!	If you hold a valid Connecticut educator certificate, or a standard or permanent certificate, please complete sections a, b, c, f and g of the instructions below.			
Instructions:					
a	•	Complete Parts I through VI and Part VIII of the application. (Applicants who hold a valid Connecticut educator certificate, or a standard or permanent certificate, need not complete Parts IV or VI).			
☐ b		Attach a photocopy of your valid Standard First Aid card, or original certificate of completion. The Standard First Aid course must be completed within three years prior to the date of application. Please remember to sign your Standard First Aid card prior to photocopying.			
С		Attach a photocopy of your valid CPR card, or original certificate of completion. Please remember to sign your CPR card prior to photocopying.			
d		Attach a photocopy of your high school diploma or an official high school transcript may be submitted in lieu of a copy of your diploma.			
e		Official transcript/certificate verifying the completion of an approved coaching course.			
f.		Attach the original certificate of completion of the concussion and head injury training requirement (Module 15) from the Connecticut Coaching Education Program (CCEP).			
g	Ţ .	Return completed application and attachments to the Bureau of Educator Standards and Certification.			
		(continued)			

For the RENEWAL of the Five-Year Renewable Coaching Permit:

Instructions:

	a.	Complete Parts I through III and Parts VII and VIII.		
	b.	Attach a photocopy of your Standard First Aid card, or original certificate of completion. The Standard First Aid course must be valid for the renewal date of the permit. Please remember to sign your Standard First Aid card prior to photocopying		
	c.	Attach a photocopy of your CPR card, or original certificate of completion, valid for the renewal date of the permit after course. Please remember to sign your CPR card prior to photocopying.		
	d.	On or after July 1, 2010, through June 30, 2015, attach original certificate of completion of the concussion and head injury training requirement (Module 15) from the Connecticut Coaching Education Program (CCEP). After July 1, 2015, attach official verification of the refresher course completed through the CCEP.		
	e.	Return completed application and attachments to the Bureau of Educator Standards and Certification.		
NOTE: Please do NOT submit verification of completion of the required 15 clock hours of seminars, course work or workshops for the renewal of the Five-Year Renewable Coaching Permit with this application. Applicants selected for a random audit will be notified in writing, and be required to submit verification.				
Please submit the application for renewal no sooner than six months prior to the expiration date of your current permit.				

How to contact the Bureau of Educator Standards and Certification:

E-mail: teacher.cert@ct.gov Website: www.ct.gov/sde Fax: 860-713-7017

Phone: 860-713-6969 24-hour Interactive Voice Response (IVR) for applicants.