

Georgia PSC Certification Application – Page 1 of 3
200 Piedmont Avenue SW, Suite 1702, Atlanta, GA 30334-9032
Fax: 404-232-2560 | mail@gapsc.com
 Please Use Black Ink or Type – Revised March 2014

1. Please use ALL CAPS to print your LEGAL NAME.

Title _____ Last Name _____
 Mr. Ms. Dr. _____
 First Name _____ Middle Name _____
 Social Security Number or GaPSC Certification ID _____ Date of Birth (MM/DD/YY) _____ / _____ / _____
 Mailing Address _____
 City _____ State _____ Zip Code _____ - _____
 Primary Telephone _____ - _____ - _____ Alternate Telephone _____ - _____ - _____

Email Address (required): _____

2. Employment Status:

I am currently employed as:
 a paraprofessional[¶] a substitute (*go to Section 3*) an educator none of these (*go to Section 3*)

[¶]Paraprofessional certificates must be processed by an employing LUA using a separate application.

I am employed by a:
 GA public school GA private school GA charter school GA state agency/RESA/EPP none of these (*go to Section 3*)

*I am employed by the following school/agency in Georgia:** _____

*Please attach a completed Employer Assurance Form.

3. Transaction(s) Requested: Check all that apply.

I am requesting a **Pre-Service certificate**.

I am requesting my first GA certificate based on:
 Certification in another state* Completion of an educator certification program[§] GA school system request

I already hold or have held a GA certificate and I would like to:

<input type="checkbox"/> Renew my certificate*	<input type="checkbox"/> Request a waiver [‡]	<input type="checkbox"/> Add a Supplemental Induction field [‡]
<input type="checkbox"/> Upgrade my certificate level*	<input type="checkbox"/> Add a non-renewable certificate field [‡]	<input type="checkbox"/> Convert to a different tier or Induction Pathway* (specify): _____
<input type="checkbox"/> Add a new renewable certificate field*	<input type="checkbox"/> Delete a certificate field [‡]	
<input type="checkbox"/> Change my name to reflect a legal name change	<input type="checkbox"/> Request a notarized certificate copy for submission to another state's certification office [‡]	
<input type="checkbox"/> Convert a Non-Renewable certificate to Renewable		

I am requesting the following unlisted transaction: _____
 * Fee applies if not employed. [§]Fee applies if the program was outside of GA & applicant is not employed. [‡] Fee applies even if employed.

Certificate Fields Requested (if applicable): _____

4. Fee: If a standard \$20 fee applies to your selected transaction(s), please choose one of the following options:

I have enclosed my \$20 cashier's check or money order, made out to the State of Georgia. **PERSONAL CHECKS ARE NOT ACCEPTED.** I have paid my \$20 fee online through my MyPSC account.

Please note: No more than \$20 will be required for one application, even if multiple transactions are requested.

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Applicant's Name: _____ **SSN or Cert ID:** _____
Please Print *Last,* *First* *Middle*

5. Academic Record: List and attach official transcripts from all U.S. colleges/universities and Georgia Professional Learning programs attended.

- Transcripts previously submitted and retained need not be resubmitted or listed here.
- Attach an additional sheet if needed.
- Unofficial copies of college transcripts will not be accepted.
- If you have attended institutions **outside the United States**, please do not submit those official transcripts. Please submit a detailed course-by-course foreign credential evaluation report. Information regarding acceptable credentialing agencies can be found on [the GaPSC website](#).

College, State	Dates Attended	Degree Earned (N/A if none)	Check One		
			Transcript On File	Transcript Attached	Transcript Being Sent

6. Certification Record: List and submit copies of the front and back of ALL valid or expired professional educator certificates/licenses issued by another state or country, the District of Columbia, the Department of Defense Education Activity (DoDEA), or the National Board for Professional Teaching Standards (NBPTS). For each state or jurisdiction, list the specific field and/or grade level held.

State/Jurisdiction	Field(s)/Subject(s) & Grade Level(s)	Validity Period	Check One	
			Copy Attached	Copy Being Sent

Do you currently hold **NBPTS certification**? Yes No *If yes, please include a copy with your application.*

Do you currently hold **Georgia Master Teacher** certification? Yes No

Have you ever worked full-time on a professional educator certificate? Yes No *If yes, please include a complete Experience Verification Form for qualifying experience as described on the form.*

7. Assessment Record: List any content/subject matter assessment(s) you have passed as a requirement for certification in any state. Submit copies of all score reports. If score reports are not available, an official letter from a state certification agency confirming the dates on which you passed each test will be accepted.

Check here if you were not required to pass any content/subject matter certification assessments.

State/Jurisdiction	Assessment Title	Date Passed	Check One	
			Copy Attached	Copy Being Sent

Applicant's Name: _____ SSN or Cert ID: _____
Please Print Last, First Middle

8. **Personal Affirmation:** The applicant should enter a truthful "Yes" or "No" response to each of the following questions. All questions must have a response in order for the application process to continue. "YES" responses automatically open an investigation and require an attached explanation along with any additional supporting documentation. **DO NOT include matters that the GaPSC has investigated or is currently investigating.**

- 1. Have you ever had an adverse action (i.e. warning, reprimand, suspension, revocation, denial, voluntary surrender, disbarment) taken against a professional certificate, license or permit issued by an agency **OTHER THAN the Georgia Professional Standards Commission?**
- 2. Are you currently the subject of an investigation involving a violation of a profession's laws, rules, standards or Code of Ethics by an agency **OTHER THAN the Georgia Professional Standards Commission?**
- 3. Have you ever received a less than honorable discharge from any branch of the armed services? (If "yes", provide a copy of form DD214.)
- 4. While under investigation, have you ever left an employment position (retired, resigned, been dismissed, terminated, non-renewed or otherwise)?
- 5. Are you currently the subject of an investigation involving sexual misconduct or physical harm to a child?
- 6. Are you the subject of a pending investigation involving a criminal act?
- 7. For any **felony** or any **crime involving moral turpitude**, have you ever:
 - ◆ Pled guilty;
 - ◆ Entered a plea of *nolo contendere*;
 - ◆ Been found guilty;
 - ◆ Pled guilty to a lesser offense;
 - ◆ Been granted first offender treatment without adjudication of guilt;
 - ◆ Participated in a pre-trial diversion program;
 - ◆ Been found not guilty by reason of insanity; or
 - ◆ Been placed under a court order whereby an adjudication or sentence was withheld?
- 8. Have you ever been convicted, or pled to a lesser offense for any sexual offense?
- 9. Have you been convicted of a drug offense (felony or misdemeanor)?

I affirm that all information is true and correct. By signing and submitting this application, I hereby give permission to the Georgia Professional Standards Commission (Commission) to obtain copies of any criminal or personnel reports relating to me which are held by any local, state or federal government agency or private entity. I authorize any such agency or entity to release those records to the Commission. This authorization is valid for 180 days from the date received by the Commission.

Signature: _____ Date: _____

NOTE: This application must be received by the GaPSC **within 90 days of the date of signature.**

Moral Turpitude	
<p><u>Crimes involving moral turpitude:</u></p> <ul style="list-style-type: none"> • Fraud or false pretenses in obtaining something of value • Larceny or a misdemeanor theft by taking • Larceny after trust • Murder • Soliciting for prostitutes • Voluntary manslaughter • Sale of narcotics or other illegal drugs • Pattern of failure to file federal tax returns • <u>Criminal Issuance</u> of a bad check • Making a false report of a crime 	<p><u>Crimes NOT involving moral turpitude:</u></p> <ul style="list-style-type: none"> • Public drunkenness • Driving under the influence • Carrying a concealed weapon • Unlawful sale of liquor • Simple Battery and Simple Assault • Misdemeanor criminal trespass • Child abandonment • Misdemeanor offense of escape • Obstruction of a law enforcement officer (Misd.) • Possession of less than one ounce of marijuana