

Commonwealth of Kentucky
EDUCATION PROFESSIONAL STANDARDS BOARD
Division of Certification, 100 Airport Road, 3rd Floor, Frankfort, Kentucky 40601
Telephone (502) 564-4606 (888) 598-7667 www.epsb.ky.gov

APPLICATION FOR CERTIFICATE RENEWAL OR DUPLICATE

Read instructions before completing application. An incomplete application will delay processing.

SECTION I. Record of Personal Information and Preparation to be completed BY APPLICANT (type or print)

A. PERSONAL INFORMATION

SSN: _____ Date of Birth: _____

Last Name: _____ Suffix: _____

First Name: _____ Middle: _____

Maiden Name: _____ Gender: Male Female

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number (____) _____ Home Mobile

Primary E-mail address: _____

Secondary E-mail address: _____

Ethnic Identification – Optional (check one)

White, Non-Hispanic Black, Non-Hispanic Hispanic

Asian or Pacific Islander American Indian Other

| FEES per 16 KAR 4:040 | | |
|-----------------------|---|---------|
| 1. | Initial Statement of Eligibility | -0- |
| 2. | One (1) year certificate | -0- |
| 3. | Five (5) year substitute certificate | \$15.00 |
| 4. | Duplicate Certificate | \$25.00 |
| 5. | Reissuance of additional four (4) year certificate | \$35.00 |
| 6. | Renewal of Statement of Eligibility | \$50.00 |
| 7. | Issuance, reissuance, or renewal of regular five (5) year certificate | \$50.00 |
| 8. | Addition of area or rank change | \$50.00 |

Fees must be paid electronically or accompany this form if applicable. Payment Options:

Money Order Cashier's Check E-pay

Make cashier's check or money order payable to:
KENTUCKY STATE TREASURER

NO PERSONAL CHECKS OR CASH ACCEPTED

A \$10.00 processing fee will be retained for certificates that cannot be issued.

Are you a veteran of the United States Armed Forces or Reserves with at least six (6) years of service? Yes No

B.1. TYPE OF CERTIFICATE REQUESTED – check all applicable

Renewal of all applicable certificates Renewal of Statement of Eligibility Duplicate Certificate

One (1) year extension or reissuance Five (5) year substitute certificate

B.2. RENEWAL BASIS

Experience College Credit Effective Instructional Leadership Act (EILA) credit

C. COLLEGE ATTENDANCE RECORD – list coursework or degrees since certificate was issued or last renewed
(attach official transcript of credits if renewing based on college coursework)

| College or University | Address | Dates of Attendance | | | | Total semester hours or degrees awarded |
|-----------------------|---------|---------------------|--------------|--|--|---|
| | | From M Y | To M Y | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

SECTION II. Record of Experience – list teaching or administrative experience since certificate was issued or last renewed
(If substitute teaching experience is submitted for renewal, please attach as a separate sheet. See instructions)

| School District | City, State | Position (include grade level & subject) | Check one | | Employment Dates | | | |
|-----------------|-------------|---|-----------|-------|------------------|--------------|--|--|
| | | | Full time | Other | From M Y | To M Y | | |
| | | | | | | | | |
| | | | | | | | | |

I verify that this applicant has had experience as indicated above

Check to indicate applicant has at least 42 hours of Effective Instructional Leadership Act (EILA) credit in the last 5 years

Superintendent Signature: _____ District: _____ Date: _____

District Telephone number: (____) _____

GENERAL INSTRUCTIONS

This application form is to be used to request renewal or duplicate of any type of Kentucky certificate for professional school personnel.

Requirements for renewal of your current certificate may be found on the certificate document or on a separate sheet mailed to you along with the certificate

APPLICATIONS ARE PROCESSED ON A FIRST-COME, FIRST-SERVED BASIS ACCORDING TO THE DATE THE MATERIALS ARE RECEIVED. APPLICATIONS RECEIVED AT OR NEAR THE END OF A SEMESTER WILL TAKE LONGER TO PROCESS. ONLY ORIGINAL SIGNATURES SHOULD BE SUBMITTED. FAXED OR SCANNED MATERIALS ARE NOT ACCEPTABLE.

Complete each section of the application according to the directions. Failure to complete the application completely and accurately will delay processing.

Section I. REQUEST FOR RENEWAL

- A. Complete all demographic information accurately. An SSN is required to process your application as your certification record in the Division of Certification is identified by your Social Security number.

Indicate your current name and mailing address on this application as well as a valid e-mail address. The address should be where further correspondence regarding this application or the renewed certificate can be mailed to you.

- B. 1. Indicate the type of certificate requested.
2. Indicate the method used to renew the certificate
- C. College Attendance Record – If the renewal of a certificate requires completion of prescribed college coursework, identify the colleges attended along with dates and the semester hours or degree awarded. Only the record of college attendance since the certificate was originally issued or last renewed should be included in this section

Official transcripts bearing the seal of the institution and the signature of the registrar are required for all coursework not previously submitted.

Section II. RECORD OF TEACHING EXPERIENCE

Indicate in this section all experience earned since the certificate was issued or last renewed. If employment has been continuous, show that employment from (date) to (date) – a date must be shown to determine the years of experience during the validity of the certificate. **DO NOT LEAVE BLANK.**

If the experience is not full-time, attach an explanation indicate the period of experience and specify the number of days per week, hours per day, etc.

For certificates that require teaching experience for renewal, experience as a substitute teacher may be accepted if the certificate holder served as a substitute for no less than 60 days per year, with a minimum of 30 days in each semester of a regular school year, and was officially employed and paid by the local board of education as a substitute teacher. Please attach documentation in the form of a letter on official school letterhead indicating the number of days employed as a substitute each semester for each year.

If you are renewing on the 42 hours of training approved for the Kentucky Effective Instructional Leadership Act (EILA), please have the district mark the appropriate box in Section II. Additional documentation is NOT needed.

Section III. CHARACTER AND FITNESS

Please enter your name and Social Security number. Answer all questions, sign, and date the section. Attach any required documentation. Enclose a copy of any out of state credential or license. Failure to complete, sign and date Section III shall result in the application being returned.

Section IV. AFFIRMATION

Sign and date the affirmation that all information provided on this form is accurate.

NAME: _____

SSN: _____

SECTION III. Character and Fitness

A. Applicants are required to submit a national and state criminal background check. The criminal background check shall be conducted within twelve (12) months prior to the date of the initial application for certification.

I am an applicant for initial certification in Kentucky and I have submitted or will submit my national and state background check.

B. If you have ever held, or currently hold a professional license, credential, or other document issued to you by any other jurisdiction other than Kentucky within the United States or abroad, enclose a copy of the certificate(s) and provide the following:

| Type of Professional Certificate | State or Jurisdiction of Issuance | Issue Date | Expiration Date |
|----------------------------------|-----------------------------------|------------|-----------------|
| | | | |
| | | | |

C. Disclosure of Background Information

| If you answer "yes" to any question below, SUBMIT a narrative with your application. The narrative should include dates, locations, school systems, court records, and any other information that explains the circumstances in detail. | YES | NO | Documentation Attached |
|---|-----|----|------------------------|
| 1. Have you ever had a professional certificate, license, credential, or any document issued for practice denied, suspended, revoked, or voluntarily surrendered? If you have had a professional certificate, license, credential, or any other document issued for practice initially denied by a licensing body, but later issued, you must answer "yes." | | | |
| 2. Have you ever been suspended or discharged from any employment or military service because of allegations of misconduct? | | | |
| 3. Have you ever resigned, entered into a settlement agreement, or otherwise left employment as a result of allegations of misconduct? | | | |
| 4. Is any action now pending against you for alleged misconduct in any school district, court, or before any educator licensing agency? | | | |
| 5. Have you ever been convicted of or entered a guilty plea, an "Alford" plea, or a plea of nolo contendere (no contest) to a felony or misdemeanor, even if adjudication of the sentence was withheld in Kentucky or any other state? For the purpose of this application, minor traffic violations should not be reported. Convictions for driving while intoxicated (DWI) or driving under the influence of alcohol or other drugs (DUI) must be reported. | | | |
| 6. Do you have any criminal charges pending against you? | | | |
| 7. If you indicated "yes" to question #1 through #6, has the EPSB previously reviewed the information? _____ (Date of Review) | | | |

I declare that I understand the standard for personal and professional conduct expected of a professional educator in Kentucky. I further certify that I have read and examined the Professional Code of Ethics for Kentucky Certified School Personnel, 16 Kentucky Administrative Regulation 1:020, understand its provisions, and agree to abide by its terms during the course of my career as a professional educator.

SIGNATURE: _____ DATE: _____

Section IV. Affirmation

I affirm and declare that all information given by me on this application is true, and correct, and complete to the best of my knowledge. I understand that any misrepresentation of facts, by omission or addition, may result in the denial or revocation of my teaching certificate. Further, I understand that KRS 161.120 provides that a teaching certificate may be revoked at any time upon determination that false information was presented toward obtaining a teaching certificate.

SIGNATURE: _____ DATE: _____

**PROFESSIONAL CODE OF ETHICS
FOR
KENTUCKY SCHOOL PERSONNEL
16 KAR 1:020**

Section 1. Certified personnel in the Commonwealth:

- (1) Shall strive toward excellence, recognize the importance of the pursuit of truth, nurture democratic citizenship, and safeguard the freedom to learn and to teach;
- (2) Shall believe in the worth and dignity of each human being and in educational opportunities for all;
- (3) Shall strive to uphold the responsibilities of the education profession:

(A) To Students

- Shall provide students with professional education services in a non-discriminatory manner and in consonance with accepted best practice known to the educator.
- Shall respect the constitutional rights of all students.
- Shall take reasonable measures to protect the health, safety, and emotional well-being of students.
- Shall not use professional relationships or authority with students for personal advantage.
- Shall keep in confidence information about students which has been obtained in the course of professional service, unless disclosure serves professional purposes or is required by law.
- Shall not knowingly make false or malicious statements about student or colleagues.
- Shall refrain from subjecting students to embarrassment or disparagement.
- Shall not engage in any sexually related behavior with a student with or without consent, but shall maintain a professional approach with students. Sexually related behavior shall include behaviors as sexual jokes; sexual remarks; sexual kidding or teasing; sexual innuendo; pressure for dates or sexual favors; inappropriate physical touching, kissing, or grabbing,; rape; threats of physical harm; and sexual assault.

(B) To Parents

- Shall make reasonable effort to communicate to parents information which should be revealed in the interest of the student.
- Shall endeavor to understand community cultures and diverse home environments of students.
- Shall not knowingly distort or misrepresent facts concerning educational issues.
- Shall distinguish between personal views and the views of the employing educational agency.
- Shall not interfere in the exercise of political and citizenship rights and responsibilities of others.
- Shall not use institutional privileges for private gain, for the promotion of political candidates, or for partisan political activities.
- Shall not accept gratuities, gifts or favors that might impair or appear to impair professional judgment, and shall not offer any of these to obtain special advantage.

(C) To the Education Profession

- Shall exemplify behaviors which maintain the dignity and integrity of the profession.
- Shall accord just and equitable treatment to all members of the profession in the exercise of their professional rights and responsibilities.
- Shall keep in confidence information acquired about colleagues in the course of employment, unless disclosure serves professional purposes or is required by law.
- Shall not use coercive means or give special treatment in order to influence professional decisions.
- Shall apply for, accept, offer, or assign a position or responsibility only on the basis of professional preparation and legal qualifications.
- Shall not knowingly falsify or misrepresent records of facts relating to the educator's own qualification or those of other professionals.