

District Adult Part-Time Certificate Application



Miami-Dade County Public Schools
 Instructional Certification
 1450 N. E. 2nd Ave., Suite 260
 Miami, Florida 33132

School Mail: 9305

Social Security #: _____ - _____ - _____

The School Board of Miami-Dade County, Florida is authorized to collect, use or release social security numbers of employees and other individuals for initial instructional certification, renewal, or add-on application [Required by FS 1012.56, and 119.071 (5) (a) 6, and/or authorized by FS 1012.21 and 119.071 (5) (a) 6]. The collection of social security numbers is either specifically authorized by law or imperative for the performance of the District's duties and responsibilities as prescribed by law [FS 119.071(5) (a) 2 & 3].

Please check the certificate service requested:

- Initial/Additional Coverage \$75.00
- Renewal \$75.00
- Duplicate/Name Change \$20.00

- All entries must be clearly typed or printed using only black or dark blue ink.
- Pay online via credit card (VISA or MasterCard) at <http://certification.dadeschools.net/> Application is non-refundable.
- Attach payment confirmation to application. Your application **cannot be evaluated** until the completed application, payment confirmation and any required documents have been received by the Office of Instructional Certification.

Name _____
 Address _____
 City, State, Zip _____
 Telephone (____) _____ - _____
 Email _____

Birthdate: ____ / ____ / ____
 High School Graduate? YES NO
 Year Graduated: _____ State _____
 Name of School: _____

College(s) Attended	State	Date(s) Attended	Graduation Date	Semester Hrs.	Major

TEACHING EXPERIENCE RECORD:

Dates of Employment	State	County	Place of Employment	Subjects Taught	Grade	FT/PT	Months per year taught

Please list subject area(s) in which you wish to be certified (\$75.00 per subject selected). Refer to Subject Area Instructional Level Codes Chart.

(1) _____ (2) _____

Please check all that apply:

Do you now hold or have held a Florida Educator's Certificate [____] and/or a Miami-Dade County Public School Educator's Certificate [____] ?

If yes, type _____, expiration date _____ and subject(s) covered _____

If Miami-Dade County Educator's Certificate, Certificate Number: _____

Prior M-DCPS Employee? YES NO If yes, give your Employee #: _____

LEGAL DISCLOSURE (Florida Law requires a Yes or No response to each of the following questions)

SEALED/EXPUNGED RECORD(S) (LIST ONLY SEALED OR EXPUNGED RECORDS)

- Yes No Have you ever had any record **sealed** or **expunged** in which you were **convicted**, found **guilty**, had **adjudication withheld**, entered a **pretrial diversion program**, or **pled guilty** or **nolo contendere** (no contest) to a criminal offense other than a minor traffic violation (**DUI is NOT** a minor traffic violation)? Failure to answer this question accurately could cause denial of a certificate.

A **YES** or **NO** answer is required by Florida Law. If you check the **YES** box, you must give the information requested for each charge. Please attach a separate sheet with your name and social security number if you need more space.

SEALED or **EXPUNGED** records **MUST BE REPORTED** pursuant ss. 943.0585 and 943.059, FS. However, the existence of such records **WILL NOT BE DISCLOSED** nor made a part of your certification file which is public record. Do not send any documents until requested.

City Where Arrested	State	Date of Arrest	Charge(s)	Disposition(s)

CRIMINAL OFFENSE RECORD(S)

Yes **No** Have you ever been **convicted**, found **guilty**, had **adjudication withheld**, entered a **pretrial diversion program**, or **pled guilty** or **nolo contendere** (no contest) to a criminal offense other than a minor traffic violation (**DUI is NOT** a minor traffic violation)? Failure to answer this question accurately could cause denial of a certificate.

A **YES** or **NO** answer is required by Florida Law. If you check the **YES** box, you must give the information requested for each charge. Please attach a separate sheet with your name and social security number if you need more space.

Report any record **other than SEALED** or **EXPUNGED** records in this section.

City Where Arrested	State	Date of Arrest	Charge(s)	Disposition(s)

PROFESSIONAL SANCTION

Yes **No** Have you ever had any professional license (a driver's license is not a professional license) or a professional certificate, including a teaching certificate, sanctioned by the issuing agency in this or **any state**? Sanction is defined to include: **suspension; revocation**; discipline, such as issuance of a **reprimand** or **fine**; or, otherwise conditioned, such as placed on any **restriction** or **probation**. Have you ever **resigned, surrendered**, or otherwise **relinquished** a professional license or certificate in this or any other state? Is there **any action pending** in this or any state against a professional license or certificate you hold or held? Is there any action pending in this or any state against an application for a professional license or certificate you have on file? (A determination of academic ineligibility is not considered denial of a license or a certificate.)

If YES to any of these questions, you must give the state, year, license or certificate, issuing agency, and reason in which such action occurred.

State: _____ **Year:** _____ **License or Certificate:** _____

Issuing Agency: _____ **Reason:** _____

AFFIDAVIT

I do hereby certify that I subscribe to and will uphold the principles incorporated in the Constitution of the United States of America and the Constitution of the State of Florida.

I do hereby affirm that all information provided in my application for a Florida Educator's Certificate is true, accurate, and complete.

WARNING: GIVING FALSE INFORMATION IN ORDER TO OBTAIN OR RENEW A FLORIDA EDUCATOR'S CERTIFICATE IS A CRIMINAL OFFENSE UNDER FLORIDA LAW. ANYONE GIVING FALSE INFORMATION ON THIS AFFIDAVIT IS SUBJECT TO CRIMINAL PROSECUTION, AS WELL AS DISCIPLINARY ACTION BY THE EDUCATOR PRACTICES COMMISSION.

Applicant Signature

Date

SUBJECT AREA INSTRUCTIONAL LEVEL CODES

The instructional level is interpreted as follows:

2 = Adult

Sample: English (Adult) = 2-021

Level	Coverage	Code	Level	Coverage	Code	Level	Coverage	Code
2	Agriculture	800	2	Greek	039	2	Political Science	058
2	Art	300	2	Guidance & Counseling	320	2	Portuguese	042
2	Biology	052	2	Health	311	2	Pre-K/Primary	327
2	Business Education	006	2	Hearing Impaired	302	2	Pre-School Education	306
2	Chemistry	050	2	Hebrew	115	2	Primary Educ. (K-3)	309
2	Chinese	143	2	History	057	2	Psychology	074
2	Computer Science	313	2	Family & Consumer Science	730	2	Reading	146
2	Dance	328	2	Humanities	132	2	Russian	121
2	Drama	150	2	Technology Education	803	2	School Food Service	148
2	Earth/Space Science	310	2	Italian	041	2	School Psychologist	322
2	Economics	059	2	Japanese	040	2	School Social Worker	321
2	Educ. Media Spec.	043	2	Journalism	033	2	Social Science	312
2	Elementary Educ.	020	2	Latin	037	2	Sociology	060
2	Emot. Handicapped	301	2	Marketing	804	2	Spanish	036
2	English	021	2	Mathematics	044	2	Spec. Lean. Disability	202
2	ESOL	172	2	Ment. Handicapped	303	2	Speech	062
2	Exceptional Student Educ.	048	2	Music	307	2	Speech-Lang. Impaired	319
2	French	035	2	Physical Education	207	2	Varying Exceptional.	013
2	Geography	061	2	Physically Impaired	304	2	Visually Impaired	305
2	German	038	2	Physics	051			