

INSTRUCTIONS FOR THE APPLICATION FOR CREDENTIAL RECOMMENDATION ADMINISTRATIVE SERVICES (CERTIFICATE OF ELIGIBILITY, INTERNSHIP, PRELIMINARY AND CLEAR)

The submission of the Application for Credential Recommendation (includes all required documentation) initiates a program evaluation and the formal credential recommendation by a Credential Analyst to the Commission on Teacher Credentialing (C.T.C.). The application may be submitted in person (see CSUSB Maps & Directions at <http://www.csusb.edu/mapsDirections/>) to Credential Processing or the Palm Desert Campus (see PDC Maps & Directions at <https://pdc.csusb.edu/campus-map-parking>), Student Services Offices (RG 203) to be forwarded to Credential Processing at the beginning of the last quarter of program course work and after all of the program requirements have been successfully completed. It is highly recommended that the applicant maintain copies of the application and all required documentation submitted to Credential Processing for their own personal records since all documentation, including transcripts, become the property of the College of Education and will not be returned or photocopied for the applicant.

NOTE: The recommended credential issuance date will be the official program completion date (includes course work and examination(s), if applicable) -OR- if three months have passed since the official program completion date, the recommended credential issuance date will be the date the completed application was officially accepted by Credential Processing. The recommended credential issuance date for Internship credentials will be the beginning date the employing school district/agency specifies on the Internship Employment Contract/letter.

The results of the program evaluation will be sent to the e-mail address provided on the Application for Credential Recommendation within approximately 5 – 10 business days from the submission date of the complete application. The e-mail address must remain valid for at least 100 days after the application submission date. Applications with coursework-in-progress will not be formally recommended to C.T.C. until 2 - 4 weeks **after** CSUSB grades have been posted. NOTE: C.T.C. has established an online Educator Page at (<https://www.ctc.ca.gov>) to check the status of your pending applications.

REQUIRED DOCUMENTATION

It is the applicant's responsibility to verify that all credential requirements are successfully completed and that all required documentation is in the Program Admissions File (P.A.F.) at the Jim and Judy Watson, College of Education Student Services **prior to or at the time of submission** of the Application for Credential Recommendation. Please note that all candidates must be officially and unconditionally admitted to the University and to the appropriate credential program in order to be formally recommended for the credential by CSUSB.

APPLICATION FOR CREDENTIAL RECOMMENDATION: All applicants must submit an original *Application for Credential Recommendation* with the Personal Information and Credential Information sections completed and the Transcript Authorization, Declaration and Date section signed. Incomplete applications and forms will be returned to the applicant for completion and resubmission.

PROCESSING FEE: The \$25 CSUSB non-refundable processing fee may be paid using one of the following payment methods:

1. Pay in-person via Student Financial Services (UH-35)
2. Pay on-line via MyCoyote account
3. Pay on-line via Campus eMarket

NOTE: Please see *Fee Receipt* for processing fee payment instructions.

*Fee subject to change

ADMINISTRATIVE SERVICES
(CERTIFICATE OF ELIGIBILITY, INTERNSHIP, PRELIMINARY AND CLEAR)

REQUIRED DOCUMENTATION (CONT'D.)

BASIC SKILLS REQUIREMENT: *Internship, Certificate of Eligibility* and *Preliminary* applicants are required to submit verification of successful completion of the Basic Skills Requirement via an official copy of the Electronic Score Report (unique bar code required) if examination was completed in August 2012 and after or if completed prior to August 2012, the original official and a copy of 1) CBEST Passing Status card; 2) CSET: Multiple Subject Plus Writing Skills Examination; or 3) CSU Early Assessment Program and/or Placement Examinations. If the Basic Skills Requirement has been previously registered with C.T.C., the applicant need only submit a copy of the valid California credential that registered the examination(s) and a copy of the examination results.

COLLEGE/UNIVERSITY TRANSCRIPTS: All applicants that have completed any of the program coursework at another institution are required to submit the updated original official transcript(s) and verification of the approved equivalency via a *Request for Course Substitution* or program plan approved and signed by the program coordinator.

VERIFICATION OF MASTER'S DEGREE: *Clear* applicants are required to submit verification of the successful completion of the M.A. in Educational Administration or related field (approved by program coordinator).

VERIFICATION OF TEACHING EXPERIENCE: All applicants are required to submit an **original** official letter completed and signed by the employing school district/agency personnel office verifying full-time teaching or service experience (based on the prerequisite credential, i.e., Pupil Personnel Services, Librarianship, Health Services, Clinical or Rehabilitative Services) in a public school, nonpublic school or private school of equivalent status. Please note that duplicated, scanned, and/or emailed copy of the letter will NOT be accepted.

Internship, Certificate of Eligibility/Preliminary applicants are required to verify at least five years of successful full-time teaching or service experience.

Clear applicants are required to verify two years of successful full-time administrative experience while holding the California Administrative Services Preliminary credential.

NOTE: Full-time experience is defined to be a minimum of four hours per day, five days a week, for 75% of a school year. Substitute or part-time service does not apply.

PREREQUISITE CREDENTIAL: All applicants are required to hold a valid California Clear or Life basic/services credential (excludes Emergency, Short-Term Staff and Provisional Internship Permits) OR Clear or Life Designated Subjects credential (requiring a bachelor's degree). NOTE: The validity of the prerequisite credential will be verified by the Credential Analyst via the C.T.C. website.

PROGRAM PLAN: *Internship* and *Certificate of Eligibility/Preliminary* applicants are required to submit a Program Plan completed and signed by the program coordinator. Candidates who completed their program prior to F'2010 are required to submit an updated Program Plan (based on the current program) to include a statement confirming that current competencies have been verified by the program coordinator.

Clear applicants are required to submit a *Program Plan Checklist* completed and signed by the program coordinator.

INTERNSHIP EMPLOYMENT CONTRACT: *Internship* applicants are required to submit a copy of the *Internship Employment Contract*/letter from the personnel office of the employing school district/agency indicating the type of administrative position and the beginning date of employment as an intern (**month/date/year**). The recommended credential issuance date will be the date the employing school district/agency specifies on the *Internship Employment Contract*/letter as the beginning date of service.

NOTE: The employing school district/agency is required to have a University-District contract referred to as a *Memorandum Of Understanding (MOU)* on file with the program coordinator.

VERIFICATION FROM PROGRAM COODINATOR: *Internship* applicants are required to submit verification (via email or letter) from the program coordinator to confirm the candidate's Internship credential eligibility; beginning date of service (**month/date/year**) and support and mentoring will be provided to the intern.

OFFER OF EMPLOYMENT: *Preliminary* applicants with an offer of employment in an administrative position are required to submit a *Verification of Employment as an Administrator – CL-777* form completed by the employing school district/agency personnel office. If the applicant does NOT have an offer of employment in an administrative position, a Certificate of Eligibility will be issued.

APPLICATION FOR CREDENTIAL RECOMMENDATION

It is the applicant's responsibility to verify that all credential requirements are successfully completed and that all required documentation is on file at the Jim and Judy Watson, College of Education Student Services Office **prior to or at the time of** submission of the Application for Credential Recommendation.

PERSONAL INFORMATION

| | | | |
|---|--------------|-------------|--|
| Student Identification Number: | | | |
| First Name: | Middle Name: | Last Name: | |
| All Former/Maiden Name(s): | | | |
| Address: | | | |
| City: | State: | Zip: | |
| Home Phone: | Work Phone: | Cell Phone: | |
| Email Address (<i>Must remain valid for at least 100 days after the application submission date</i>): | | | |

CREDENTIAL INFORMATION

If applying for more than one credential, please submit a separate application for each credential:

Indicate a check (✓) next to the CREDENTIAL TYPE for which you are applying:

- | | | |
|--|--|---|
| <input type="checkbox"/> Administrative Services | <input type="checkbox"/> Multiple Subject (SB 2042) | <input type="checkbox"/> Reading & Language Arts Specialist |
| <input type="checkbox"/> Ed. Specialist: Early Childhood | <input type="checkbox"/> Multiple Subject w/Bilingual AA (SB 2042) | <input type="checkbox"/> Reading & Literacy Leadership Specialist |
| <input type="checkbox"/> Ed. Specialist: Mild/Moderate | <input type="checkbox"/> PPS: School Counseling | <input type="checkbox"/> Single Subject (SB 2042) |
| <input type="checkbox"/> Ed. Specialist: Moderate/Severe | <input type="checkbox"/> PPS: School Psychology | Subject Area: _____ |

Indicate a check (✓) next to the CREDENTIAL TERM for which you are applying:

- | | | |
|--|--|--|
| <input type="checkbox"/> Internship | <input type="checkbox"/> Internship (Restriction Change) | <input type="checkbox"/> Clear |
| <input type="checkbox"/> Internship (Appeal) | <input type="checkbox"/> Certificate of Eligibility | <input type="checkbox"/> Clear Ed Specialist: Level II |
| <input type="checkbox"/> Internship (Reactivation) | <input type="checkbox"/> Preliminary | |

Indicate a check (✓) next to the Added Authorization for which you are applying and list the subject area(s):

- | | |
|---|---|
| <input type="checkbox"/> Adapted Physical Education | <input type="checkbox"/> Reading & Literacy |
|---|---|

List all CSUSB course work for which you are currently enrolled, if applicable:

Example: EDUC 603

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TRANSCRIPT AUTHORIZATION, DECLARATION AND DATE

Confirm the following statements by providing your signature and date below:

I, the aforementioned, authorize Credential Processing to order and/or submit my transcripts(s), if applicable, to the Commission on Teacher Credentialing (C.T.C.). I understand that with the submission of this application, I am required to follow-through with C.T.C.'s online application no later than 90 days after the credential recommendation date. Non-compliance will result in having to re-process an Application for Credential Recommendation with the appropriate fees. I certify under penalty of perjury that all the required documentation and foregoing information submitted for this application is true and correct.

Applicant's Signature:

Date:



VERIFICATION OF EMPLOYMENT AS AN ADMINISTRATOR

To be Completed by Employing Agency

1. Personal Information

Applicant's Full Legal Name: _____
First Middle Last

Social Security Number: _____

2. Employing Agency

Title of Administrative Position: _____

Date Initial Employment in an Administrative Position is to begin (mm/dd/yy): _____

Name of Employing Agency: _____

Mailing Address: _____
Street

City State ZIP

County of Employment: _____ Telephone: (_____) _____

Name of Immediate Supervisor: _____

Position: _____

Approved by:

Name of Employer or Designee (print or type) Title of Employer or Designee

Signature of Employer or Designee Date

3. Tentative Plan for Developing the Individualized Induction Plan

Mentor Tentatively Assigned to Credential Holder: _____

Position of Mentor: _____

Employing Agency: _____

Agency Tentatively Selected for Development of Individualized Induction Plan and Completion of Professional-level Program:

I am aware that I must develop an Individualized Induction Plan during my first year of employment as an administrator.

Signature of Applicant Date

FEE RECEIPT

1. Pay in-person by completing a Fee Receipt and submitting it directly to Student Financial Services (UH-35) with payment (cash, check, money order, traveler's check, cashier's check or pin-based ATM accepted).

NOTE: A completed Fee Receipt **with Student Financial Services fee stamp** will need to be submitted with your application and/or request.

2. Pay on-line via your MyCoyote account with an electronic check or credit card (American Express, Discover, MasterCard or VISA accepted).

- Sign in to your MyCoyote account via the CSUSB Home page at <http://www.csusb.edu/> (**Coyote ID & password required**)
- Select **Student Center**
- Select **Make a Payment** under the Finances Section
- Read Statement and Select **Next**
- Select **Make Payment** (top menu)
- Select **College of Education Student Services** (right menu)
- Select **Credential Service Fee**
- Manually enter fee amount (refer to the application/request instructions for the required processing fee)
- Select **Add to Basket**
- Checkout and make your payment

NOTE: A completed Fee Receipt with a copy of the MyCoyote confirmation page will need to be submitted with your application and/or request.

3. Pay on-line via Campus eMarket (available for applicants that do not have a valid MyCoyote account) with an electronic check or credit card (American Express, Discover, MasterCard or VISA accepted).

- Go to the Campus eMarket page at <https://commerce.cashnet.com/eCampus>
- Select **College of Education Student Services**
- Enter the required information
- Check the appropriate box (refer to the application/request instructions for the required processing fee)
- Select **Add to Basket**
- Checkout and make your payment

NOTE: A completed Fee Receipt with a copy of the Campus eMarket confirmation page will need to be submitted with your application and/or request.

PERSONAL INFORMATION

| | | | |
|--------------------------------|--------------|-------------|--|
| Student Identification Number: | | | |
| First Name: | Middle Name: | Last Name: | |
| Address: | | | |
| City: | State: | Zip: | |
| Home Phone: | Work Phone: | Cell Phone: | |
| CSUSB Email Address: | | | |

SERVICE FEE: Indicate a (✓) next to the appropriate processing fee. If more than one, please complete a separate Fee Receipt.

- ☐ \$75 Subject Matter Competency Evaluation
- ☐ \$35 Initial Designated Subjects Credential Recommendation Processing Fee
- ☐ \$35 Program Admission Filing Fee
- ☐ \$35 Program Completion Verification
- ☐ \$25 Credential Recommendation Processing Fee
- ☐ \$10 Out-Of-State Program Completion Verification
- ☐ \$10 Subject Matter Competency Completion / Four-Fifths Completion Letter

OFFICE USE ONLY: PS#: 501899-RT011-C0720-5000

QC#: 716

RECEIVED BY: