

## INSTRUCTIONS FOR THE APPLICATION FOR CREDENTIAL RECOMMENDATION CLEAR DESIGNATED SUBJECTS SUPERVISION AND COORDINATION

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The submission of the Application for Designated Subjects Credential Recommendation (including all required documentation) initiates a program evaluation and the formal credential recommendation for a Clear Designated Subjects Supervision and Coordination credential 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://www.csusb.edu/pdc/parking-information-campus-map>), Student Services Offices (RG 203) to be forwarded to Credential Processing. 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.

The recommended credential issuance date will be the date the completed application was officially accepted by Credential Processing. The results of the program evaluation will be sent to the e-mail address provided on the Application for Designated Subjects Credential Recommendation within approximately 2 - 4 business weeks from the submission date of the complete application.

### REQUIRED DOCUMENTATION

It is the applicant's responsibility to verify that all credential requirements are successfully completed and that all required documentation is 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.

**APPLICATION FOR CREDENTIAL RECOMMENDATION:** All applicants must complete sections 1, 2, and 3 (signature required). Incomplete applications and forms will be returned to the applicant for completion and resubmission.

**PROCESSING FEE:** All applicants are required to submit confirmation of payment of the \*\$25 CSUSB non-refundable processing fee. Please see Fee Receipt for processing fee payment instructions.

**C.T.C. APPLICATION (Form 41-4):** All applicants are required to submit a completed \*\*Application for Credential Authorizing Public School Service. Please be sure to complete sections 1, 6, 7, and 9 on the form. Please DO NOT complete sections 2, 3, 4, 5, and 8. NOTE: A Personal and Professional Fitness Explanation Form must accompany each "Yes" answer in section 6.

**C.T.C. APPLICATION FEE:** All applicants are required to submit a \*\$100 money order or cashier's check only made payable to the Commission on Teacher Credentialing (or C.T.C.).

**BASIC SKILLS REQUIREMENT:** All applicants are required to submit verification of successful completion of the Basic Skills Requirement via one of the following: 1) Official copy of the Electronic Score Report (unique bar code required); 2) Official CBEST Passing Status Card; 3) Official CSET: Multiple Subject Plus Writing Skills Examination (unique bar code required); 4) 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 TEACHING EXPERIENCE:** All applicants are required to submit an original official letter or Designated Subjects: Verification of Teaching Experience form completed by the employing school district/agency personnel office verifying three years of successful full-time teaching experience in the subject named on and during the validity of the Preliminary Designated Subjects Credential. NOTE: Community College teaching experience does not fulfill this requirement.

**PROGRAM PLAN:** All applicants are required to have a current Program Plan completed and signed by the Program Coordinator.

\*Fee subject to change.

\*\* C.T.C. requires the Form 41-4 be free from errors (such as blotted out, crossed out, or white out). Applications received with errors will be returned and a new Form 41-4 will be required.

## APPLICATION FOR DESIGNATED SUBJECTS 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 submitting the Application for Credential Recommendation. *NOTE: To complete this form, download and/or print the pdf document.*

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### 1. PERSONAL INFORMATION

Student Identification Number: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_  
*First Middle Last*

All Former Name(s): \_\_\_\_\_

Address: \_\_\_\_\_  
*Number and Street City State Zip Code*

Home/Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Email Address (MyCoyote or Personal): \_\_\_\_\_

### 2. CREDENTIAL INFORMATION

CREDENTIAL TYPE: **SUPERVISION AND COORDINATION**

CREDENTIAL TERM: **CLEAR**

SUBJECT AREA (List the subject area(s) for which are listed on your valid Designated Subjects credential):

\_\_\_\_\_  
\_\_\_\_\_

### 3. TRANSCRIPT AUTHORIZATION, DECLARATION AND DATE

I, the aforementioned, authorize Credential Processing to order and/or submit my transcript(s), if applicable to the Commission on Teacher Credentialing (C.T.C.). I hereby under the penalty of perjury that all the required documentation and foregoing information submitted for this application are true and correct.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

# APPLICATION FOR CREDENTIAL AUTHORIZING PUBLIC SCHOOL SERVICE

(For Privacy Act Notification see [Application Instructions](#))

Mail application and payment  
(check or money order) to:  
Commission on Teacher Credentialing  
Certification Division  
1900 Capitol Avenue  
Sacramento, California 95811-4213

Appeal: \_\_\_\_\_

Route to: \_\_\_\_\_

Commission Use Only: Fee Information		
APP	FP	Other

CTC Use Only	IHE/County/District Use Only  Issuance Date: _____  Email: _____
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## 1. PERSONAL INFORMATION (type or print)

*Social Security or Individual Tax Identification Number: _____		*Date of Birth: (mm/dd/yyyy) _____	
*My Full Legal Name: _____			
First	Middle	Last	
All Former/Maiden Name(s): _____		County/District of Employment (CA only): _____	
*Address: _____			
*City: _____		*State: _____	*Zip: _____
Home Phone: _____	Work Phone: _____	Mobile Phone: _____	
*Email Address: _____			

\* = Required Information

## 2. APPLICATION TYPE REQUESTED: (select only one option)

- New Credential/Permit    
  Extension by Appeal    
  Upgrade (Clear Credential or Child Development Permit)    
  Renewal  
  
 Add Subject/Authorization to Existing Document    
  Change of Restriction    
  Other: \_\_\_\_\_

## 3. CHOOSE DOCUMENT TYPE: (make only one selection in this section)

\* = Available at the request of a California Local Education Agency (LEA) only. Documents in bold font require you to select from Section 4 below a Subject or Authorized Area of Service to be listed on the document.

<b>TEACHING CREDENTIALS:</b> Single Subject Multiple Subject Education Specialist Career Technical (CTE) Adult Education Other: _____	<b>SERVICES CREDENTIALS:</b> Administrative Pupil Personnel Speech-Language Pathology Teacher Librarian School Nurse Other: _____	<b>EMERGENCY PERMITS*:</b> Limited Assignment * Short-Term Staff* Provisional Internship* EM CLAD* EM Bilingual* EM Teacher Librarian* EM Resource Specialist*	<b>SUBSTITUTE PERMITS:</b> 30-Day Substitute Career Substitute* Prospective Substitute <b>Teaching Permit for Statutory Leave*</b> 30-Day CTE Substitute	<b>CHILD DEVELOPMENT PERMITS:</b> Assistant Associate Teacher Teacher Master Teacher Site Supervisor Program Director Children's Center Permit School-Age Emphasis
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## 4. SELECT AUTHORIZATION/SUBJECT AREA(S): (to choose additional subject areas, see page 5 "Comments" box)

Multiple Subject (Elementary Teaching) Single Subject (Secondary Teaching):  (Specify World Language-if applicable)  Special Education Specialty Areas:  CTE Industry Sector:  Adult Education Subjects:	English Learner Authorization CLAD Certificate Bilingual Authorization: (Specify Language)  _____  Pupil Personnel Services:	Supplementary Authorization/ Subject Matter Authorization:  <hr style="border: 0.5px solid red;"/> CTC Use Only
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## 5. CHILD DEVELOPMENT PERMIT RENEWAL SELF-VERIFICATION

As the holder of a Child Development Permit (any level except the Associate Teacher Permit) you must complete a specific number of planned and approved professional growth activities for each five-year renewal. These activities must be recorded on the *Professional Growth Plan and Record* form. As the holder of a Child Development Permit choosing to self-verify completion of these requirements, you may be subject to an audit. The Commission reserves the right to request submission of these forms for auditing purposes any time within one year following submission of this application. If the Commission determines through its audit that you did not complete the professional growth requirements, your permit will not be renewed and you may be subject to adverse action on other credentials you currently hold. You must retain your *Professional Growth Plan and Record* form for one year following the submission of this application.

### **DECLARATION:**

I certify (or declare) that I have read the above and completed the following for this renewal of my Child Development Permit:

I have completed \_\_\_\_\_ hours of professional growth activities

My Professional Growth Advisor is \_\_\_\_\_  
Advisor's Name Advisor's Phone Number

## 6. PROFESSIONAL FITNESS QUESTIONS

Answers to the following questions are required. If you answer yes to any question, you must complete the corresponding [Professional Fitness Explanation Form](#).

Before granting your application, the Commission will review, at a minimum:

- Federal Bureau of Investigation criminal history (rap sheet)
- California Department of Justice criminal history (rap sheet)
- International database of teacher misconduct maintained by the National Association of State Directors of Teacher Education and Certification (NASDTEC)
- Previous reviews by the Commission
- Complaints from others
- Notifications from school districts
- Teacher preparation test score violations

You must disclose misconduct, even if:

- It happened a long time ago
- It happened in another state, federal court, military or jurisdiction outside the United States
- You did not go to court and your attorney went for you
- You did not go to jail or the sentence was only a fine or probation
- You received a certificate of rehabilitation
- Your conviction was later dismissed (even if under Penal Code section 1203.4), expunged, set aside or the sentence was suspended



**WARNING:** You will be required to sign your application under penalty of perjury; by doing so you are also stating that you understand:

- That the information you provide is true and correct;
- That you understand any and all instructions related to your application;
- Failure to disclose any information requested is falsification of your application and the Commission may reject or deny your application or take disciplinary action against your credential;
- The Commission may reject your application if it is incomplete and it will be delayed.

a. Have you ever been:

- dismissed or,
- non-reelected or,
- suspended without pay for more than ten days, or
- retired, or
- resigned from, or otherwise left school employment

because of **allegations of misconduct** or while **allegations of misconduct** were pending?

Yes

No

b. Have you ever been convicted of any felony or misdemeanor in California or any other place?

You must disclose:

- all criminal convictions
- misdemeanors and felonies
- convictions based on a plea of no contest or nolo contendere
- convictions dismissed pursuant to Penal Code Section 1203.4
- driving under the influence (DUI) or reckless driving convictions
- no matter how much time has passed

You do not have to disclose:

- misdemeanor marijuana-related convictions that occurred more than two years prior to this application, except convictions involving concentrated cannabis, which must be disclosed regardless of the date of such a conviction.
- infractions (DUI or reckless driving convictions are not infractions)

Yes

No

c. Are you currently the subject of any inquiry or investigation by any law enforcement agency or any licensing agency in California or any other state?

Yes

No

d. Are any criminal charges currently pending against you?

Yes

No

e. Have you ever had any credential, including but not limited to, any Certificate of Clearance, permit, credential, license or other document authorizing public school service, revoked, denied, suspended, publicly reprovved, and/or otherwise subjected to any other disciplinary action (including an action that was stayed) in California or any other state or place?

Yes

No



f. Have you ever had any professional or vocational (not teaching or educational) license revoked, denied, suspended, and/or otherwise subjected to any other disciplinary action (including an action that was stayed) in California or any other state or place?

Yes

No

## 7. CHILD ABUSE AND NEGLECT MANDATED REPORTING

As a documentholder authorized to work with children, it is part of my professional and ethical duty to report every instance of child abuse or neglect known or suspected to have occurred to a child with whom I have professional contact.

I understand that I must report immediately, or as soon as practicably possible, by telephone to a law enforcement agency or a child protective agency, and will send a written report and any evidence relating to the incident within 36 hours of becoming aware of the abuse or neglect of the child.

I understand that reporting the information regarding a case of possible child abuse or neglect to an employer, supervisor, school principal, school counselor, coworker, or other person is not a substitute for making a mandated report to a law enforcement agency or a child protective agency.

I understand that the reporting duties are individual and no supervisor or administrator may impede or inhibit my reporting duties.

I understand that once I submit a report, I am not required to disclose my identity to my employer.

I understand that my failure to report an instance of suspected child abuse or neglect as required by the Child Abuse and Neglect Reporting Act under Section 11166 of the Penal Code is a misdemeanor punishable by up to six months in jail or by a fine of one thousand dollars (\$1,000), or by both that imprisonment and fine.

I acknowledge and certify that as a documentholder, I will fulfill all the duties required of a mandated reporter.

I agree

## 8. EMPLOYING AGENCY INFORMATION

This section must be completed for all credential, certificate, and permit types where service is restricted to an employing agency.

County CDS Code \_\_\_\_\_ School District CDS Code \_\_\_\_\_

Charter School/Non-Public School or Agency/Statewide Agency Name \_\_\_\_\_

Applications for One-year Nonrenewable Credentials, Provisional Internship Permits, Short-Term Staff Permits, Limited Assignment Permits, and Emergency Permits (except 30-Day or Prospective Substitute Teaching Permits), must be filed through the employing agency. Employers must have an annual Declaration of Need for Fully Qualified Educators on file with the Commission prior to the submission of any applications for Limited Assignment or Emergency Permits.

**Before submitting, please review the application for completeness:**

- 1) Personal information with correct SSN, date of birth, and email address filled in on page 1
- 2) Type of credential clearly marked on page 1 (use box below for additional subject/authorization requests)
- 3) All Professional Fitness Questions marked Yes or No on pages 3 and 4
- 4) Read and agreed to your responsibilities as a mandated reporter
- 5) Payment (check or money order attached to the front of this form). See [Credential Leaflet CL-659](#) for fee schedule.



Checks or money orders may be made payable to the Commission on Teacher Credentialing. The Commission *does not* accept cash payments. All application fees are non-refundable.

**Applications submitted that are incomplete or without the appropriate fee included will not be processed and will be returned.**

**9. OATH AND AFFIDAVIT \***

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I solemnly swear (or affirm) that I will support the Constitution of the United States of America, the Constitution of the State of California, and the laws of the United States and the State of California. I hereby certify (or declare) under penalty of perjury under the laws of the State of California that all the foregoing statements in this application are true and correct.

Date \_\_\_\_\_ City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_  
(mm/dd/yyyy) (where you sign the form)

SIGNATURE OF APPLICANT \_\_\_\_\_

\* You must complete all portions of this section.

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Comments/Additional Subject Requests:



## VERIFICATION OF DESIGNATED SUBJECTS TEACHING EXPERIENCE

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This form may be used by the applicant's current and/or previous employing school district and/or agency to verify the applicant has completed two years of successful teaching on the basis of the Preliminary Designated Subjects (Career Technical Education or Special Subjects) teaching credential in the industry sector(s) listed on the credential.

NOTE: To complete this form, download and/or print this pdf document.

Definition of Teaching Experience: Successful teaching of a minimum of one course in each of six terms within the validity of the Preliminary/Clear Designated Subjects credential.

This is to certify that \_\_\_\_\_  
(NAME OF APPLICANT)

has successfully completed \_\_\_\_\_ course(s) in each of \_\_\_\_\_ term(s)

in the position of \_\_\_\_\_ within the validity of the  
(POSITION TITLE)

Preliminary/Clear Designated Subjects \_\_\_\_\_ credential authorizing

teaching in the subject(s) area of \_\_\_\_\_.

School District/Employing Agency: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Number Street

City State Zip Code

Telephone Number (include area code): \_\_\_\_\_

Authorized Personnel Designee Signature: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_



## FEE RECEIPT INSTRUCTIONS

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All applicants are required to pay the \$25 non-refundable processing fee via one of the methods below.  
NOTE: Confirmation of the payment must be submitted with the Application for Credential Recommendation.

### IN PERSON

Pay in-person at Student Financial Services (UH-35) with payment (cash, check, money order, traveler's check, cashier's check or pin-based ATM accepted). **Due to the current COVID-19 situation, the pay in-person option is not available.**

### ON-LINE (MyCoyote Account)

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

- Sign in to your MyCoyote account via the CSUSB Home page at <http://www.csusb.edu/>
- 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

### ON-LINE (Without MyCoyote Account)

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) following these steps:

- 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