Application for a Montana Class 1, 2 or 3 Educator License

Denise Juneau, Superintendent **Montana Office of Public Instruction**	**Montana Office of Public Instruction** **Attn: Educator Licensure** P.O. Box 202501 Helena, MT 59620-2501	**To contact Educator Licensure** **406-444-3150 or cert@mt.gov** **www.opi.mt.gov/cert**

Instructions: Complete all sections of this application. The information you provide will help our staff determine all documents have been received and your application is ready for evaluation. **Your application for licensure will not be evaluated until all documents are received.** It is your responsibility to follow up with our Educator Licensure Division on the progress of your application.

This form requires a notarized signature. It cannot be submitted electronically. We suggest one of the following three procedures:
1. Save this form to your computer. Complete it, then print, sign, and mail it; or
2. Complete the form from our webpage, print and sign it and mail it; or
3. Print this form, complete it by hand, sign and mail it to us.

****NOTICE: INCOMPLETE APPLICATIONS MORE THAN ONE YEAR OLD WILL BE DESTROYED****

Personal Information

Last Name	First Name	Middle Initial
Folio ID (assigned by OPI)	Name as you wish it to appear on your license	
Address	Former Name(s) (Maiden or Other)	
City	State	Zip Code	Country
Last four digits of your SSN	Date of Birth	Email
Cell Phone	Home Phone	Other Phone

Is the Applicant Hispanic/ Latino? ◯ Yes ◯ No

Is the applicant from one or more of the following races:
- ☐ American Indian/Alaska Native
- ☐ Black or African American
- ☐ Asian
- ☐ White
- ☐ Native Hawaiian or Other Pacific Islander

Gender: ◯ Female ◯ Male

Have you ever held a Montana educator license? If yes, please indicate under what name and when you held the license.

School Year for license to be activated (all licenses are effective on July 1):

Oath

You must subscribe to the following oath or affirmation before a notary public or other officer authorized by law to administer oaths.(MCA §20-4-104.) "I solemnly swear (or affirm) that I will support The Constitution of the United States of America and The Constitution of the State of Montana."

Declaration

I declare under penalty of perjury the information included in or with my application is true, correct, and complete to the best of my knowledge. In signing this application, I am aware a false statement of material fact, misrepresentations, or omissions of material fact in or with this application may lead to the denial, revocation or suspension of the license(s) I am seeking. I acknowledge I have read the Professional Educators of Montana Code of Ethics as provided on the Licensure web page.

Notary

Signature of Applicant_____

Subscribed and sworn before me this _____ **day of** _____**, 20**_____**.**

Signature of Notary Public_____

My Commission Expires_____

Notary Seal

County of_____

State of_____

Last Name		First Name		MI	

I am applying for the following License(s) **Check all that apply. You must select endorsement areas for each class of license.**

If you do not qualify for the Class of License for which you apply, you will either be offered a different license or receive notification of formal denial.

Teaching Licenses

☐ **Class 2 Standard Teaching License:**	**OR**	☐ **Class 1 Professional Teaching License**
☐ I have a Bachelor's degree (no Master's degree); and		☐ I have a Master's degree; and
☐ I have completed a university-based teacher preparation program, either as part of my degree or in a post-baccalaureate status.		☐ I have completed a university-based teacher preparation program, either as part of my degree or in a post-baccalaureate status; and
		☐ I have 3 years of contracted teaching experience in K-12, accredited schools.

Class 1 and 2 Endorsements

☐ **Elementary K-8.** In Montana, Elementary K-8 teachers are eligible to teach all subjects in grades K-8. Montana does not offer Middle School endorsements. Those who complete a Middle School preparation program in another state will be offered the most appropriate license and endorsement(s) based on their preparation.

☐ **Secondary 5-12** (select from these available subject areas)

☐ Agriculture	☐ Family & Consumer Science	☐ Physical Science
☐ Biology	☐ Geography	☐ Political Science
☐ Business Education	☐ Health	☐ Psychology
☐ Chemistry	☐ History	☐ Science Broadfield
☐ Computer Science	☐ Industrial Arts	☐ Social Studies Broadfield
☐ Drama	☐ Industrial Technology	☐ Sociology
☐ Earth Science	☐ Journalism	☐ Speech/Communication
☐ Economics	☐ Marketing	☐ Speech/Drama
☐ English	☐ Mathematics	

K-12 Endorsements: Candidates requesting K-12 endorsements will be evaluated based on their level(s) of preparation. Candidates must demonstrate preparation at both the elementary and secondary levels to qualify for K-12 endorsements. If preparation is not evident, the candidate may be offered a license at the appropriate level. Those wishing to teach in the Career and Technical Education areas must apply for the Class 4 License. Applicants prepared with Library Media as their only endorsement area do not qualify for full Montana licensure without a teaching major in another endorsable area.

☐ Art		World Languages:	☐ German	☐ Other (please indicate language):
☐ Library	☐ School Counseling		☐ French	
☐ Music	☐ Special Education		☐ Spanish	
☐ PE & Health	☐ Traffic Education			
☐ Reading	☐ English as a Second Language			

Permissive Special Competency Montana does not offer endorsements in these areas. If you have a minimum of 20 semester credits in these areas, you may qualify for a PSC , indicating your additional preparation in these areas.

- ☐ Early Childhood Education
- ☐ Technology in Education
- ☐ Gifted and Talented Education

Administrator Licenses

☐ **Class 3 Administrator License**

☐ **Superintendent:**	☐ **Principal: select level** ☐ **K-8** ☐ **5-12** ☐ **K-12**
☐ I meet the requirements for a Principal endorsement; and	☐ I have a Master's degree in Educational Leadership or an equivalent Master's degree as accepted by a Montana university to meet this requirement; and
☐ I have completed 1 year of administrative experience as an appropriately licensed and assigned Principal; and	☐ I have completed an accredited professional educator preparation program which included the required coursework for a Principal endorsement; and
☐ I have completed a minimum of 18 semester graduate credits beyond the Master's degree in the required coursework, including 3 semester credits each in Montana School Law and Montana School Finance.	☐ I have 3 years of contracted teaching experience in a K-12, accredited school.

☐ **Supervisor:** Select an endorsement from teaching areas above and review the "Qualifications" document for Supervisor at www.opi.mt.gov/cert under "Application Materials"-->"Administrator" information.

Academic and Education Experience Information

Last Name		First Name		MI	

Information disclosed on this page will help our staff determine all documents have been received and your application is ready for evaluation. You may attach a separate sheet, as long as all required information is included.

Academic Background

List all institutions which you have attended, regardless of the major program or if you earned a degree. Please indicate universities from which the MT OPI can expect to receive official transcripts.

College/University	City/State	Dates Attended	Degree	Major(s)	Minor(s)

Educator Preparation Completed

List all teacher, administrator, school psychologist, or school counselor preparation programs you have completed, whether or not a degree was earned.

College/University	City/State	Dates Attended	Type of Preparation (e.g., teacher, administrator)

Studies in Progress

List any college credit you are completing which might apply to this application.

College/University	City/State	Dates Attended	Course	Expected Completion Date

Experience as a Professional Educator

Complete this only if applying for the Class 1 Professional Educator License or the Class 3 Administrative License. The Verification of Education Experience Form must be completed by the school district(s).

Name of School	City/State	Dates Employed	Assignment: Teacher, Administrator or other	Grade level assignment

Out of State License or New Educator?

☐ **New Educator:** My college or university will complete and mail the Institutional Recommendation Form to the Office of Public Instruction; **OR**

College or University

☐ **Out of State License Holder:** A copy of your valid, active license from another state may replace the Institutional Recommendation form. In some instances, the form may be required. If so, we will inform you.

The license(s) is/are from (please list all states and **include a copy**):

Character and Fitness Information

Last Name		First Name		MI	

Taxpayer Identification Number (TIN), Social Security Number (SSN) or Canadian identification number (GST):
Section 7 of Public Law 93-579 requires us to advise you of the following in connection with our request for your Taxpayer Identification Number (TIN): Disclosure of your taxpayer identification number is mandatory pursuant to the National Child Protection Act of 1993, 42 USC 5119a and c, which authorizes a state and national criminal history background check to determine the fitness of an employee, volunteer, or other person with unsupervised access to children, the elderly, or individuals with disabilities. Your taxpayer identification number will also be used for verification purposes in connection with college transcripts and other education records pertaining to your application for teacher licensure. Your application will be scanned and stored on secure electronic media. The paper copy of your application will be shredded.

TIN, SSN or GST		**Signature**	Date:	

1. Do you currently hold or have you ever held a professional certificate, license, or other credential in ANY field (e.g. education, cosmetology, social work, outfitting, acupuncture) in Montana or any other state? If yes, please provide the following information for every certificate, license, or credential. You may use a separate sheet of paper. Please be sure to sign and date any additional pages. ◯ Yes ◯ No

State or Jurisdiction		Type of License		Certificate or License Number	
State or Jurisdiction		Type of License		Certificate or License Number	

2. Have you ever had adverse action taken against any professional certificate, license, or other credential issued for practice in ANY field, or is any such action pending? If yes, select the actions below and explain on a separate sheet, providing dates, locations, circumstances, and outcome for each incident. Sign and date each page. ◯ Yes ◯ No

☐ Letter of Warning	☐ Suspension	☐ Voluntary Surrender	☐ Failure to Renew	☐ Other (please describe)
☐ Reprimand	☐ Denial	☐ Revocation	☐ Cancellation	

3. Have you ever resigned or been disciplined, discharged, or asked to resign or retire from a professional position or military service because of allegations of misconduct, or is any such action pending? This includes discipline for failure or refusal to fulfill an employment contract. If yes, explain on a separate sheet, providing dates, locations, and circumstances for each incident. Sign and date each page. ◯ Yes ◯ No

4a. Have you ever been convicted of any crime (misdemeanor or felony)? If yes, explain on a separate sheet , providing dates, locations, and circumstances for each incident. Sign and date each page. ◯ Yes ◯ No

4b. Have you entered into a pretrial diversion* for any crime? If yes, select from the options below and explain on a separate sheet, providing dates, locations, and circumstances for each incident. Sign and date each page. ◯ Yes

**A pretrial diversion program is any program that results in dismissal of charges upon satisfaction of conditions such as paying restitution or fines, having no similar offenses for a specified time, performing community service, completing rehabilitation or treatment programs, satisfying probation, etc. Answer "yes" even if you were not required to complete the program.* ◯ No

☐ Deferred Prosecution	☐ Deferred or Suspended Imposition of Sentence	☐ Deferred Adjudication
☐ Stay of Adjudication	☐ First Time Offender Programs	☐ Other Similar Programs (Please describe)

5. Check One:
NOTE: YOUR APPLICATION WILL NOT PROCEED UNLESS WE RECEIVE YOUR FINGERPRINT BACKGROUND CHECK RESULTS.

☐ I have completed the Montana-based fingerprint background check and mailed it to the Montana Department of Justice; or

☐ I have completed a Montana-based fingerprint background check within the past 2 years either for employment in a Montana public school or admittance to a teacher education program at a unit of the Montana University System. I have requested that the school district or Montana university send those results to OPI.

By signing this application, I acknowledge I have read and understood the foregoing. I declare under penalty of perjury the information included in or with my application is true, correct, and complete to the best of my knowledge. I am aware false statements of material fact, misrepresentations, or omissions of material fact in or with this application is grounds for the denial, revocation, or suspension of the license(s) I am seeking.

Signature	Date	

Checklist

Last Name		First Name		MI	

Acknowledge each requirement is included with the application or in process by checking next to the item.
Return this page with your application.

Application & Fees

☐ All required and applicable sections of the application are complete.

☐ A check for the appropriate amount is enclosed, payable to the OPI. To calculate how much you owe:

Example	How many Licenses (**NOT endorsements**) are you applying for? Class 1 Teaching and Class 3 Admin = **2**	Times $30 per license = **$60**	Plus **$6** (the initial filing fee)	Total Due: **$66**
	How many Licenses are you applying for?	Times $30 per license	Plus **$6** (the initial filing fee)	Total Due

Transcripts and Licenses

Transcripts can be sent either directly to OPI from the college or university OR accompany the application. Transcripts do not need to be in a sealed envelope, but they must be official transcripts, not photocopies. Please be sure the name on the transcript matches the applicant's name or there is some other identifying information on the transcript.

☐ Transcripts have been ordered from the university(ies) and will be sent directly to the OPI.

☐ Transcripts included with this application.

☐ A copy or copies of my license(s) from other states is/are included with this application

Fingerprint-Based Background Check Requirement

Applicants for initial licensure, those who apply for emergency authorization of employment, and those who seek to reinstate a lapsed or revoked license must submit a fingerprint card for a national fingerprint-based background check through the Montana Department of Justice. The instructions for completing the background check are provided on a page 6 of this application. Please contact us at 406-444-3150 or cert@mt.gov if you have questions about this requirement. Thank you for your cooperation.

☐ My Fingerprint card has been mailed to Montana Department of Justice **OR** I have completed the "Request to Share fingerprint Results with OPI" form. My fingerprints will be sent to OPI from a MT public school or public school district or university.

Signatures Complete?

☐ Page 1, Notary Section, verifying the Oath.

☐ Page 4, top, Social Security Number Disclosure Acknowledgement

☐ Page 4, bottom, indicating the information provided is correct to the best of your knowledge.

Class 1 & 3 Applicants

☐ Work Experience as an Educator

Please direct your school district(s) administrator or Human Resources/Personnel representative to www.opi.mt.gov/cert, "Other Forms", "Class 1 or 3 Verification of Experience" form.

Processing Time:
Once all documents are received, processing time will vary depending on time of year and volume of applications in our office. Between April and September, most evaluations are completed within 4 to 6 weeks. You will receive a postcard verifying you have applied for a license. The postcard indicates to Montana school administrators you have applied for licensure. Hiring is strictly the concern of the local school districts in Montana, and districts may choose to accept the postcard to determine eligibility for their interview process.

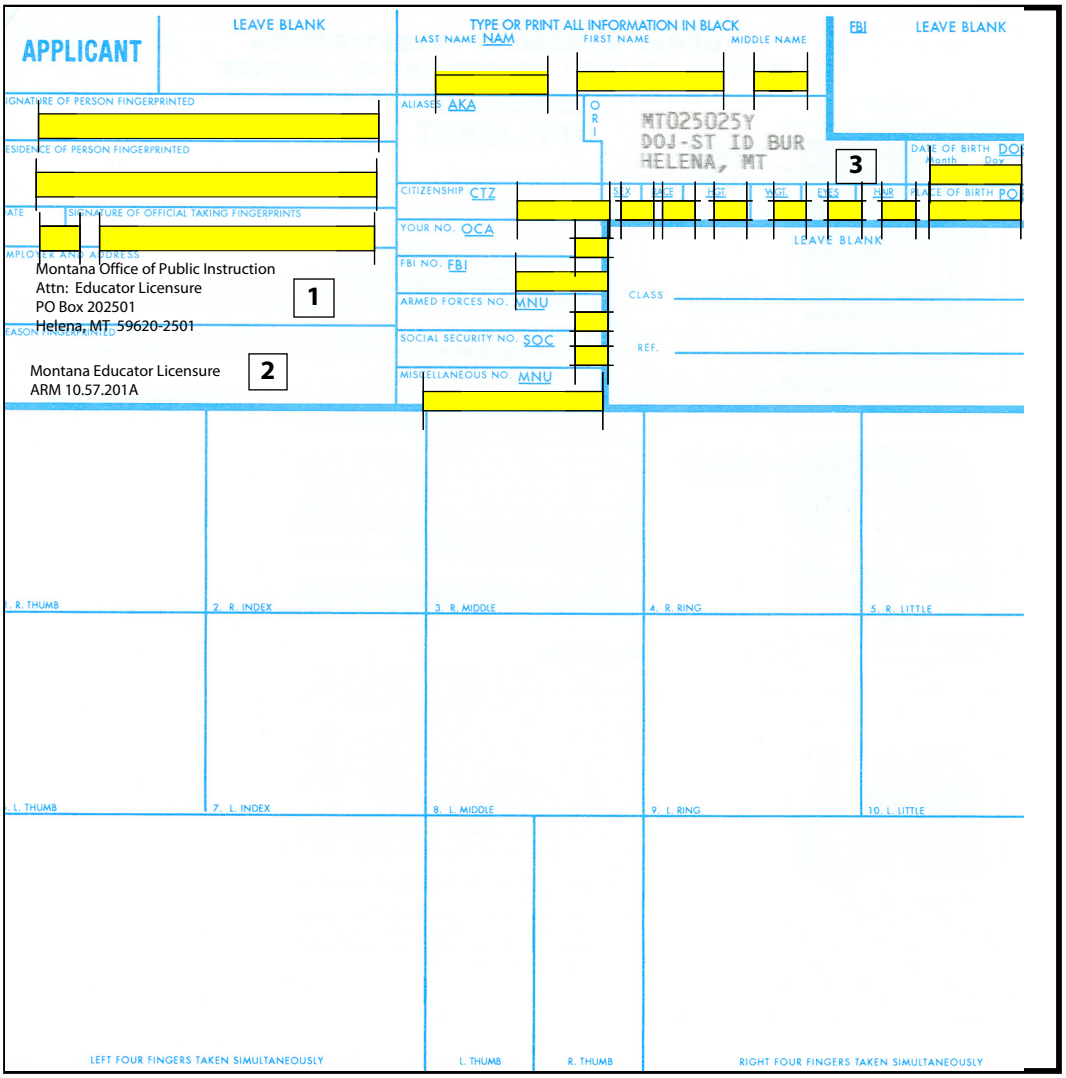
FINGERPRINT BACKGROUND CHECK INSTRUCTIONS
Do not return this page with your application

Step	Action	
1	Go to your local law enforcement office or other agency offering fingerprinting services.	
2	Request fingerprint card. These are provided to law enforcement offices at no charge to them. They can contact the Montana Department of Justice at 406-444-3625 for assistance in ordering the cards.	
3	With a pen, complete the highlighted sections which apply to you.	
4	Complete the additional text required (Montana Educator Licensure information, numbers 1, 2 and 3)	
5	Complete the fingerprinting by the method available from your law enforcement office (LiveScan or ink). It is imperative that the fingerprints are clear. Smudged or unclear prints will be rejected by the state and FBI. If your prints are rejected, you will be required to submit a new set of fingerprints. There is no fee for re-submission to the Montana Department of Justice.	
6	***Mail the completed fingerprint card to:*** ***Montana Department of Justice*** ***PO Box 201403*** ***Helena, MT 59620-1403***	***Include a check for $29.25, payable to the DOJ.*** ***DO NOT FOLD THE COMPLETED FINGERPRINT CARD.***
7	If you do not receive a response from the OPI, your fingerprints have most likely cleared. Please call 406-444-3150 or email cert@mt.gov for specific information.	
8	OPI will notify you by letter of rejected fingerprints. Please follow the instructions in that letter to complete the process again.	

To the right is a sample of a standard fingerprint card from a local law enforcment agency or other agency offering fingerprinting services.

Please ensure you enter the required information in areas marked 1, 2, and 3.

Failure to complete all required sections will result in a delay in application processing.



Denise Juneau, Superintendent
Montana Office of Public Instruction
www.opi.mt.gov