

APPLICATION FOR CREDENTIAL AUTHORIZING PUBLIC SCHOOL SERVICE

(For Privacy Act Notification see Application Instructions)

Appeal: _____

Route to: _____

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

Commission Use Only: Fee Information		
APP	FP	Other

CTC Use Only	IHE/County/District Use Only Issuance Date: _____ Email Address: _____
--------------	--

1. PERSONAL INFORMATION (type or print)

*Social Security or Individual Tax ID Number:		*Date of Birth: (mm/dd/yyyy)	
*Applicant's Name: JONATAN J BRAVO			
First	Middle	Last	
Former/Maiden Name(s):		County or District of Employ (CA only): KINGS	
*Address:			
*City:		*State:	*Zip:
Home Phone:	Work Phone:	Message Phone:	
*Email Address:			

2. CREDENTIAL TYPE (choose only one type below) **OPTIONS: I AM APPLYING FOR MY FIRST CALIFORNIA CREDENTIAL/PERMIT**

<p>Substitute Permits (PT)</p> <p>_____</p> <p>Single Subject (Secondary Teaching)</p> <p>PROVISIONAL INTERNSHIP PERMIT (PP)</p> <p>Specify Subject (If you are requesting more than one subject, enter it in <i>Comments</i> box.)</p> <p>MATHEMATICS</p> <p>Specify World Language other than English (if applicable)</p> <p>_____</p> <p>Term _____</p> <p>Multiple Subject (Elementary Teaching)</p> <p>_____</p> <p>Term _____</p> <p>Education Specialist (Special Education) (If you are requesting more than one specialty area, enter it in <i>Comments</i>.)</p> <p>_____</p> <p>Specify Specialty Area</p> <p>_____</p> <p>Other Specialist Credentials</p> <p>_____</p> <p>Term _____</p> <p>Added Authorizations (AASE)</p> <p>_____</p>	<p>English Learner Authorizations</p> <p>_____</p> <p>BILINGUAL AUTHORIZATION - Specify Language</p> <p>_____</p> <p>Services Credentials</p> <p>_____</p> <p>Term _____</p> <p>Specify Other Health Services</p> <p>_____</p> <p>Child Development Permits (PK)</p> <p>_____</p> <p><input type="checkbox"/> School-Age Emphasis</p> <p>Designated Subjects (PW)</p> <p>_____</p> <table style="width: 100%;"> <tr> <td style="width: 70%;">Subject(s)</td> <td style="width: 30%;">Term</td> </tr> <tr> <td>_____</td> <td>_____</td> </tr> </table> <p>Supplementary Authorization(s) (PJ)</p> <p>_____</p> <p>Subject Matter Authorization(s) (PJ)</p> <p>_____</p> <p style="text-align: center;">CTC Use Only</p>	Subject(s)	Term	_____	_____
Subject(s)	Term				
_____	_____				

* = Required Fields



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

5. CHILD ABUSE AND NEGLECT MANDATED REPORTING

As a document holder 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 document holder, I will fulfill all the duties required of a mandated reporter.

I agree

6. 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 16-10165 School District CDS Code 16-63982

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, check 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.



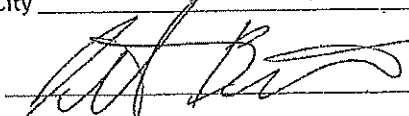
Checks or money orders may be made payable to the Commission on Teacher Credentialing. The Commission *does not* accept cash payments. All application fees are non-refundable.

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

7. OATH AND AFFIDAVIT

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 9/23/16 City LEMOORE County KINGS State CA

SIGNATURE OF APPLICANT 

Comments/Additional Subject Requests:





State Of California
 Commission On Teacher Credentialing
 Certification Division
 1900 Capitol Avenue
 Sacramento, CA 95811-4213

Email: credentials@ctc.ca.gov
 Website: www.ctc.ca.gov

VERIFICATION OF REQUIREMENTS For the Provisional Internship Permit

This form must be completed by the employing agency and submitted with each application for a Provisional Internship Permit.

Name of Applicant JONATAN J BRAVO

SSN [REDACTED]

Name of Employing Agency LEMOORE UNION HIGH SCHOOL DISTRICT

County/District/CDS Code 16-10165 16-63982

- Multiple Subject
- Single Subject - Specify subject(s): MATH
- Education Specialist - Specify specialty area(s): _____

By submitting this form, the employing agency named above verifies that items 1-6 have been completed.

1. A diligent search has been conducted for a suitable credentialed teacher or qualified intern teacher by the following methods and verification of such recruitment efforts is attached:

Required recruitment methods (provide photocopies of **all** of the following):

- Distributed job announcements
- Contacted college or university placement centers
- Advertised on the Internet

Optional recruitment methods (in addition to the required methods above):

- Advertised in professional journals
- Attended job fairs in California
- Attended recruitment out-of-state
- Contacted California teacher recruitment centers
- Advertised in local/national newspapers
- Other (explain) _____

2. The permit holder will be provided orientation, guidance and assistance during the valid period of the permit
3. Public notice of intent to employ the applicant in the identified position has been given and meets the following criteria (check the box that applies):

- Public School District**
 Public notice was presented as an action item on the governing board agenda and acted upon favorably. A copy of the agenda item is attached.

(continued)

The agenda item included the applicant's name, assignment, including subject(s) grade level(s), school site, and a statement that the applicant will be employed on the basis of a Provisional Internship Permit.

County Offices of Education, Nonpublic Schools, Statewide Agencies, and Charter Schools

Public notice was posted at least 72 hours before the position was filled. A copy of the dated notice is attached.

Public notice included the applicant's name, assignment, including subject(s) grade level(s), school site, and a statement that the applicant will be employed on the basis of a Provisional Internship Permit.

Public notice included a signed statement from the superintendent or administrator confirming there were no objections to the issuance of the permit.

4. The permit holder will be provided assistance in developing a personalized plan through an agency-defined assessment that would lead to meeting subject matter competence related to the permit
5. The permit holder will be provided assistance to seek and enroll in subject matter training, such as workshops or seminars and site-based courses along with training in test-taking strategies and will assist the permit holder in meeting subject matter competence related to the permit
6. The candidate has been apprised of the steps required to earn a credential and enroll in an intern program

I certify under penalty of perjury that I need to complete NCLB core area subject matter to enroll in an intern program for the education specialist preliminary credential

Applicant Signature _____

Employing Agency Certification

This form must be signed by the District/County Superintendent, Personnel Administrator, NPS/NPA Administrator, or Designee.

I certify under penalty of perjury that the information provided on this form is true and correct.

Signature _____

Title _____

Date _____

Ann Brewer
DIRECTOR OF HUMAN RESOURCES

9-23-16