RESIDENT TEACHER APPLICATION

1. Complete the Resident Teacher Application that is attached. Leave the section entitled Residency Placement blank. Leave signature of program provider blank. SIGN SIGNATURE OF TEACHER APPLICANT AND DATE.

2. Complete the Professional Conduct Form that is attached. (All questions must be answered)

3. Both forms must be signed and dated at the bottom of each page.

4. You must attach a copy of the 3 page pdf of your PRAXIS I scores indicating passing scores.

5. Please indicate if PRAXIS I was waived by an ACT score of 22 or higher.

6. There is no fee for this application.

7. Please return all of these documents via email to: teachcert@louisiana.edu by March 22, 2019.
RESIDENT (R) TEACHER APPLICATION

☐ Initial Resident Teacher Certificate  ☐ Renewal of Resident Teacher Certificate

PLEASE TYPE OR PRINT IN INK

Social Security Number _____ - _____ - _____  Date of Birth _________________________

Name of Applicant: ________________________________________________________________

(First)  (Middle)  (Last)

Address: ____________________________________________________________

(Street)  (City)  (State)  (Zip Code)

Phone: Home: (_____)  Work: (_____)  Email Address: ____________________________

Please indicate the start and end academic terms for the residency:

☐ FALL/SPRING ("R" Certificate Period JULY_____ to JUNE______)

☐ SPRING/FALL ("R" Certificate Period JAN _____ to DEC _____)

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RESIDENCY PLACEMENT

<table>
<thead>
<tr>
<th>PROGRAM CERTIFICATION AREA</th>
<th>GRADE LEVEL(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SCHOOL

DISTRICT

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PROGRAM PROVIDER INFORMATION

NAME OF PROGRAM PROVIDER

Signature of Program Provider:
I verify that the above named individual has met ALL requirements for the issuance of the resident teacher certificate as outlined in Bulletin 746. I agree that my electronic signature as entered below is the legal equivalent of my manual signature on this application.

DATE

Signature of Teacher Applicant:
I verify that I understand and meet all requirements for issuance of the resident teacher certificate as outlined in Bulletin 746. I agree that my electronic signature as entered below is the legal equivalent of my manual signature on this application.

DATE
**PROFESSIONAL CONDUCT FORM**

(All questions must be answered)

<table>
<thead>
<tr>
<th>NAME OF APPLICANT: (Include First, Middle, Maiden, and Married)</th>
<th>Social Security Number:</th>
</tr>
</thead>
<tbody>
<tr>
<td>ADDRESS:</td>
<td>DATE OF BIRTH:</td>
</tr>
</tbody>
</table>

**Each Question must be answered:**

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Have you ever had any professional license/certificate denied, suspended, revoked, or voluntarily surrendered? If YES, in which state?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Are you currently being reviewed or investigated for purposes of such action as stated in #1 or is such action pending? If YES, in which state?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Have you ever been convicted of any felony offense, been found guilty or entered a plea of <em>nolo contendere</em> (no contest), even if adjudication was withheld? If yes, please provide the following: Date of Conviction:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>State of Conviction:</td>
<td>Court Jurisdiction of Conviction:</td>
<td></td>
</tr>
<tr>
<td>4. Have you ever been convicted of a misdemeanor offense that involves any of the following: a. Sexual or physical abuse of a minor child or other illegal conduct with a minor child. b. The possession, use, or distribution of any illegal drug as defined by Louisiana or federal law.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Have you ever been granted a pardon or expungement* for any offense as stated in #3 or #4?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**NOTICE---EXPUNGEMENTS, FIRST OFFENDER PARDONS, PRE-TRIAL DIVERSENS:**

Criminal Background Checks (CBCs) conducted for purposes of employment will be conducted in accordance with La. R.S. 17:15 and La. R.S. 15:587.1. Pursuant to Louisiana law R.S. 15:587.1., background checks shall disclose ALL ARRESTS, COURT ACTION and CONVICTIONS, (including but not limited to expungements, first offender pardons and pre-trial diversion), and a copy of the report shall be provided to the Louisiana Department of Education (LDE), in addition to the potential employer or LA Education Agency (LEAs).

*Per BESE policy set forth in Bulletin 746, Louisiana Standards for State Certification of School Personnel, Section 903.C, "failure to disclose actions such as first offender pardons, pre-trial diversion, expungements, etc. is grounds for certification denial and/or revocation.”

If you answered "YES" to any questions, #1 through #5, you must provide court certified copies of all documents and proceedings, civil records of Federal, State and/or District School Board actions, or other relevant documents that provide full disclosure of the nature and circumstances of EACH separate incident in your application packet.

I affirm and declare that all information given by me in the responses to items #1 through #5 above is true, correct, and complete to the best of my knowledge. I understand that any misrepresentation of facts, by omission or addition, may result in criminal prosecution and/or the denial or revocation of my teacher certificate. I agree that my electronic signature as entered below is the legal equivalent of my manual signature on this document.

| SIGNATURE OF APPLICANT: | DATE: |