

OFFICE OF TEACHER CERTIFICATION

Joseph and Violet Pless Hall
82 Washington Square East, 2nd Floor
New York, New York 10003-6680
(212) 998-5033 tel
(212) 995-4835 fax
mark.perez@nyu.edu

**EDUCATIONAL THEATRE
PROFESSIONAL CERTIFICATION APPLICATION PACKET**

Dear Educational Theatre Initial Teacher Certification Applicant:

The New York State Education Department (NYSED) – Office of Teaching Initiatives requires students competing teacher certification programs to apply online for their teaching certificates through the TEACH Online system.

On the TEACH Online system you may submit an online teacher certification application, submit an online fingerprint clearance application, pay application fees online by using a credit card, check online for the status of your certificate application and view online all correspondence sent by the Office of Teaching. TEACH is available 24 hours a day, 7 days a week so that you may enter your application online and check the status of your application at your convenience.

Attached please find a Request for Recommendation Form, a Student Application Information Sheet and a Program/Major List to assist you with the application process.

Please be advised that Professional Certification requires 3 years of paid, full-time classroom teaching experience. Classroom teaching experience includes experience earned in a public or approved nonpublic preschool, elementary, middle, or secondary school. Enter your teaching experience on the TEACH Online system at the time of application. Teaching experience will not be credited immediately but needs to be approved by an evaluator at the NYSED before the Professional Certificate will issue.

Professional Certification also requires also requires 1 year of mentored experience. Documentation of the mentored experience must be provided by the superintendent of the employing school district. For details including Verification of Mentored Experience Form, please visit www.highered.nysed.gov/tcert/resteachers/mentoring.htm

Once you have completed the online application process, please return the Request for Recommendation Form to your departmental certification liaison (bottom of form), so that we may recommend you for certification to the New York State Education Department.

If you have any questions, please let me know.

Sincerely,



Mark J. Perez
Certification Officer



Student Application Information Sheet

New York State Teacher Certification

Please use the information provided below to assist you in completing your online application for NYS Teacher Certification.

First: Create User Login and Password

In order to apply online, you will enter TEACH online services via the Office of Teaching Initiatives Web site at www.highered.nysed.gov/tcert and create a TEACH login and password at the New York State Directory Services site. Click on "TEACH Online Services" then on "Self Registration" in top right hand corner. Instructions are provided as you go through this process. Once you have created your login and password this step is completed and you never have to repeat this process (unless you forget your password).

Do not complete fingerprint info or pay the \$94.25 fee if you have already been fingerprinted through the NYSED or by the NYCDOE. If you have been fingerprinted by the NYCDOE and your fingerprint clearance does not appear on the TEACH system, complete the attached OSPRA 104 and forward to NYCDOE (address/fax at bottom of form).

Second: Creating a TEACH Account & Completing the Application

Step 1: Create Applicant Profile

Enter your personal information and preferences (such as opting to be included in the statewide teacher clearinghouse or having most correspondence from us transmitted via email).

Use the information below to complete the Self-Reported education portion of the online application:

Institution Name:	New York University - Main		Number of Credits:	
Award Title:	Master of Arts		Date Attended To:	/ /
Program:	See Attached			
Major:	Education			
Date Degree Received:	/ /	[Date Format: mm/dd/yyyy]		
Date Attended From:	/ /			

Step 2: Select Certificate(s)

A. Use the following information to select the appropriate certificate title and type:

- Select your Area of Interest: **Classroom Teacher**
- Select your Subject Area: **See Attached**
- Select the Grade Level: **See Attached**
- Select the Title: **See Attached**
- Select the Type of Certificate: **Professional**

B. When prompted for program code, see attached 5 digit code listed before your program major

C. Select "I want my application to be reviewed by the State Education Department"

Continue through the application answering all required questions; sign the affidavit and application; and make your payment. You may pay online using a credit card or print out the payment coupon and mail in a US Postal Money Order.

Need help?

<p>Problems completing your application? Mark J. Perez, Certification Officer (212) 998-5033 mark.perez@nyu.edu</p>	<p>Problems using TEACH? New York State Education Dept. Contact Info: Technical support available to you by telephone Monday – Friday from 8:00 a.m. until 6:30 p.m. at (518) 486-6041. Web: https://portals.nysed.gov/tcert/technical.htm</p>
---	---

Educational Theatre Programs

Master of Arts

For "Self-Reported Education" Section		For "Select Certificates" Section		
Program Code and Major	Subject Area	Grade Level	Title	
24689 Educational Theatre, All Grades	Theatre	PreK-12 All Grades	Theatre	
28220 Educational Theatre, All Grades and English 7-12	Theatre Also add: English	PreK-12 All Grades	Theatre	
31726 Educational Theatre, All Grades and Social Studies 7-12	Theatre Also add: Social Studies	Adolescent - Grades 7-12 PreK-12 All Grades Adolescent - Grades 7-12	English Language Arts 7-12 Theatre Social Studies 7-12	

REQUEST FOR RECOMMENDATION FOR PROFESSIONAL NEW YORK STATE CERTIFICATION FORM

NAME _____

SSN _____ NYU ID _____ DOB _____

ADDRESS _____

E-MAIL _____ TELEPHONE _____

DEGREE AND MAJOR _____

DEGREE COMPLETION/CONFERRAL DATE _____

PROFESSIONAL CERTIFICATE(S) APPLIED FOR _____

REQUEST FOR RECOMMENDATION

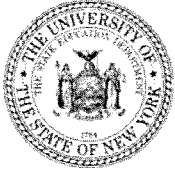
I have applied online to the New York State Education Department for my Professional teaching certificate(s). I qualify for this/these certificate(s) on the basis of my degree, and have completed the certification program, including the required internships, at New York University. I hereby request that New York University recommend me for Professional Certification to the New York State Education Department.

Signature of Applicant

Date

PLEASE RETURN FORM by mail, fax or scan and email to:

Mark J. Perez
Certification Officer
NYU Steinhardt
82 Washington Square East, Room 229
New York, New York 10003
(212) 998-5033
(212) 995-4353 fax
mark.perez@nyu.edu



OSPRA 104 (10/07)

Authorization to Forward Criminal History Record Information from the City School District of the City of New York to the New York State Education Department

Type or Print All Information

Office of School Personnel Review and Accountability
NYS Education Department
ph: (518) 473-2998

www.highered.nysed.gov/tcert/ospra
OSPRA@mail.nysed.gov

Instructions to Applicant: Please complete Sections 1, 2 and 3 and mail the form to the address in Section 4.

Please Note: This form is to be filed by individuals who have been previously fingerprinted (after July 1, 1990) for a license and/or employment by the New York City Board of Education (NYCBOE) and are authorizing the NYCBOE to forward their criminal history to the New York State Education Department for certification application and/or employment purposes.

SECTION 1

(Inaccurate or incomplete information will delay processing)

Name: (Last)	(First)	(Middle)	Sex: (M/F)
Home Address: (Street, Apt. #)		Social Security Number	
City, State, Zip:		Telephone (Area Code and Number)	
E-mail Address:		Date of Birth (Month, Day, Year)	

SECTION 2

Please choose (✓) one of the following:

- I am leaving or have left the employ of the NYCBOE and am seeking clearance for certification and/or employment.
- I am remaining in the employ of the NYCBOE and I am seeking clearance for certification.
- I am remaining in the employ of the NYCBOE and I am seeking additional employment in a covered school other than the NYCBOE.

SECTION 3

- I hereby authorize the NYCBOE to forward the content of my criminal history record as secured from DCJS and the FBI to the New York State Education Department as a condition of my application for certification and/or clearance for employment. I further understand that the NYCBOE is authorized to forward subsequent criminal history notifications received from DCJS to the New York State Education Department.
- I understand that if my fingerprints have not been retained by DCJS, I will have to be fingerprinted again to meet the requirements of Chapter 180 of the Laws of 2000.
- I understand that if I am seeking clearance for employment, an OSPRA 102 will have to be filed by my prospective employer before a clearance will be issued.

Signature: _____ Date: _____

SECTION 4

MAIL TO:



Division of Human Resources
HR Connect Walk-in Center
65 Court Street, Room 102
Brooklyn, New York 11201
Ph: (718) 935-4000 Fax: (718) 935-2726