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# Explanation of Substitute Authorizations

It is not necessary to obtain a Substitute Authorization if you hold a valid Professional or Initial Teaching License, or an Interim Teaching Authorization. Please provide your employing school district(s) with a copy of your valid license.

Holders of a Special Services Provider License may not apply for a 5-Year Substitute Authorization.

**A Five (5) Year Substitute License may be issued to an applicant who:**

- Holds a valid standard teaching certificate, credential or license from another state
- OR**
- Holds or has held a standard Colorado teaching certificate or license.

(A substitute permit or authorization from another state cannot be considered a standard teaching license.)

**A Three (3) Year Substitute Authorization may be issued to an applicant who:**

Holds a Bachelor's degree or higher from a regionally accredited institution of higher education or its equivalent.

(A renewal of the three-year Substitute Authorization does not require the resubmission of an official transcript.)

**A One (1) Year Substitute Authorization may be issued to an applicant who:**

- Has a high school diploma as verified by the employing school district.
- Provides evidence of successful experience working with children or youth as verified by the employing school district.

NOTE: Applications for the One-Year Substitute Authorization should be obtained from the employing school district, not from CDE or on-line. School districts can contact the Educator Licensing Unit to request an electronic copy of the One-year Substitute Authorization.

# Checklist: Five Year Substitute Authorization

Please use the following checklist when compiling your application materials. All required data on the application must be complete, including dates and signatures. **Failure to complete all required items on the application will result in the application being returned to you without action.**

1. \_\_\_\_\_ Page 4. Sections A, B, C and D must all be completed by the applicant. The original form must be signed and dated with original signatures on all required pages. **Section D must be signed and dated to avoid having the application returned without action.**
2. \_\_\_\_\_ Pages 5 and 6, the Oath and Consent Form. Please complete, sign, date and attach documentation, if required. Please answer all questions. **Page 6 must be signed and dated to avoid having the application returned without action.**
3. \_\_\_\_\_ Page 7 Affidavit Form signed and dated by applicant (**does not have to be notarized**).
4. \_\_\_\_\_ Page 8 and 9 **Notarized** form (with notary expiration date) of acceptable identification to verify lawful presence (Page 9 **only** must be notarized).
5. \_\_\_\_\_ A copy of your standard teaching certificate or license either valid or expired. For in-state residents, If you do not have a copy, please submit information regarding the date of certification and expiration. All out-of-state applicants must submit a copy of a valid license/credentials.

(Note: Renewal applications for the Five-Year Substitute Authorization do not require a copy of your license.)

6. \_\_\_\_\_ CDE requires official documentation from an applicant prior to making a name change for that person. Please provide a photocopy of your marriage license, divorce decree or court document verifying your name change, if you have held a previous license or authorization issued by CDE.
7. \_\_\_\_\_ Non-refundable application processing fee of **\$60.00 (see page 19)** paid with the CDE on-line payment system. Applicant will be issued a **Receipt Number** at the time of payment. That receipt number **must** be written on the **first page** of your application. Please include a copy of your Receipt Page (download from the on-line payment page) with your application. Debit or Credit Card payments cannot be made in person.
8. \_\_\_\_\_ A completed CDE fingerprint card and processing fee must be submitted directly to the Colorado Bureau of Investigation prior to application. \*Please see page 18 for instructions. Your authorization cannot be issued until CDE has received your criminal history record check from CBI.

\* Submission of a fingerprint card and fingerprint fee is required unless you previously submitted a fingerprint card and fee to CDE.

Keep a copy of your application for your records.

Prior to submission of your application, review for completion and remove all instruction/checklist sheets.

Applications are evaluated in the order received. Processing takes several weeks.

You can check the status of your application online at:

<https://forms.cde.state.co.us/pes/DOBSearch.jsp>

Send the completed application to:

Educator Licensing, Colorado Department of Education, 201 E. Colfax Ave. Room 106, Denver, CO 80203

# Application: Five Year Substitute Authorization

**Section A** (Please print or type) To be completed by applicant. License will be issued in legal name.

Legal Name Last	First	Middle	Maiden/Former Name
Mailing Address			Date of Birth
City	State	Zip	Social Security Number
Telephone Work ( ) _____ Home ( ) _____			Write your 6-digit receipt number here. Please attach a copy of your Payment Receipt.  _____
Email Address			

Are you a Military spouse? **Yes**  **No**

Did you submit a CDE-approved fingerprint card to CBI? When? \_\_\_\_\_ CBI is taking approximately 10-12 weeks to process fingerprint cards. We must receive your CBI report before we can complete your application evaluation.

**Section B** To be completed by applicant

Do you hold a standard educator license, certificate, authorization or credential from another state? **Yes**  **No**   
 If yes, attach a copy or provide the following information:

State \_\_\_\_\_ Title of license/certificate held \_\_\_\_\_ Effective/Expiration date \_\_\_\_\_

Please indicate if this is a renewal of a five-year substitute application: **Yes**  **No**

**Section C** To be completed by applicant. List all K-12 school employment within the last five years in specialization area.

Employment Dates Mo./Year – Mo./Year	Employer	Assignments Or Duties

**Section D** To be completed by applicant.

### Affidavit

I, \_\_\_\_\_, affirm under penalty of perjury under  
 (PRINT NAME)  
 the laws of the State of Colorado that all information included in this application is true and correct.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Do not write in this area. For use by Licensing Unit only.**

**Type of Authorization:**

**Effective Date:**

**Approved By:**



# Oath and Consent Form

All questions must be answered. All documentation requested must accompany this application.

**To be completed by the applicant. Please print or type**

Legal Name	Last	First	Middle	Maiden/Former Name
Mailing Address	Number and Street		Apt. #	Date of Birth
City	State	Zip		Month _____ Day _____ Year _____
Telephone				Social Security Number
Work ( ) _____	Home ( ) _____		Email address	

Please list all former names you have used and approximate dates of use.  
(If more than three, list on a separate sheet of paper)

Name	Date
Name	Date
Name	Date

1. Have you ever been convicted of a felony or misdemeanor (other than a misdemeanor traffic offense or traffic infraction)?

Yes                       No

If yes, please include with your application a copy of the police report, copies of the charging document, and the disposition document from the court for each conviction.

For the purposes of this question, "convicted" is defined as the occurrence of ANY of the following in connection with a criminal charge:

1. A finding of guilty by a jury or court.
2. A court's acceptance of a plea of guilty or a plea of nolo contendere.
3. A court's imposition of a deferred or suspended sentence.
4. A court's approval of an agreement for a deferred prosecution.
5. Forfeiture of a bail, bond or other security deposited to secure a defendant's appearance.
6. Payment of a fine.

Please specify the offense(s) for which you were convicted (including whether this was a felony or misdemeanor), along with the date of conviction and the court entering the judgment of conviction.

Offense	Felony/ Misdemeanor		Conviction Date	Court and Location
	<b>F</b>	<b>M</b>		
	<b>F</b>	<b>M</b>		
	<b>F</b>	<b>M</b>		
	<b>F</b>	<b>M</b>		

2. Have you ever had a teacher, principal, administrator or special services license, certificate or authorization, or any other occupational permit, license, credential or equivalent document subjected to any disciplinary proceedings, including, but not limited to, annulment, denial, reprimand/admonition, suspension or revocation, or have you ever voluntarily surrendered such a document in Colorado or any other state or place, or are you currently under investigation by any licensing or credentialing agency or organization?

Yes

No

If yes, please provide the following information on a separate sheet of paper:

- the type of license, permit, certificate, credential, or any other equivalent documents;
- the name and number under which it was held;
- the issuing and disciplining authority;
- the nature of the charges;
- the date of resolution;
- the final disposition, e.g., revocation or suspension; and
- the date and result of any subsequent re-application.

If you are currently under investigation by any licensing or certifying agency, please state:

- the agency's name and address; and
- the nature of the charge(s) or events that caused such investigation to occur.

3. Have you ever been dismissed or discharged, or have you resigned in order to avoid discipline or discharge, by any employer?

Yes

No

If yes, then state on a separate sheet of paper the name, address, and telephone number of the employer, your dates of employment, the nature of the allegations/grounds for separation and the final disposition.

I hereby attest that all information I am submitting is true and complete to the best of my knowledge. I understand that any intentional misrepresentation of facts may result in denial or annulment of a license and that falsification of statements on and with this attestation may be punishable by law. I authorize law enforcement agencies, courts, offices of prosecuting attorneys, and custodians of employment, school district, military, and licensure records to disclose to the **Colorado Department of Education** information from the records in their possession. I further authorize these agencies to permit the examination and to furnish copies of all records and other reports in their possession and control. I understand that the specific type of information to be disclosed includes reports of any kind contained in my record file, regardless of their origin.

\_\_\_\_\_  
Signature of the Applicant

\_\_\_\_\_  
Date



## Colorado Department of Education

### C.R.S. 24-76.5-103

*Pursuant to Section 24-76.5-103, Colorado Revised Statutes, only persons lawfully present in the United States will be issued a Colorado educator license or authorization. (This includes adding an endorsement or renewing a license or authorization.) Each applicant for a Colorado educator license or authorization must complete, sign and return the following affidavit, with the completed application packet.\**

## AFFIDAVIT

I, \_\_\_\_\_, swear or affirm under penalty of perjury under the laws of the State of Colorado that:

**(check only one box)**

- I am a United States citizen, or
- I am a Permanent Resident of the United States, or
- I am lawfully present in the United States pursuant to Federal law.

I understand that this sworn statement is required by law because I have applied for an educator license or authorization with the State of Colorado. I understand that State law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*This requirement must be met only **ONCE**.

# VERIFICATION OF LAWFUL PRESENCE

## Compliance with the Provisions of Colorado Revised Statute (CRS) 24-76.5-103

Pursuant to Section 24-76.5-103, Colorado Revised Statutes, only persons lawfully present in the United States will be issued a Colorado educator license or authorization. (This includes adding an endorsement or renewing a license or authorization.) Each applicant for a Colorado educator license or authorization must provide the Colorado Department of Education with an accepted form of identification at the time of application. January, 2007\*

This memo details the requirements which must be met for an applicant to comply with CRS 24-76.5-103 - *Verification of Lawful Presence in the United States*.

### I. **IF THE COMPLETED APPLICATION IS BEING SUBMITTED BY MAIL:**

A **NOTARIZED** copy of *one* of the following must be submitted with the completed application and supporting documents:

#### **Acceptable Documentation for Verification of Legal Residence:**

- A notarized copy of a valid State-issued Driver's License, bearing the applicant's photograph, **OR**
- A notarized copy of a valid State-issued Identification Card, bearing the applicant's photograph, **OR**
- A notarized copy of a valid United States passport, **OR**
- A notarized copy of a valid U.S. Military or Military Dependent Identification Card, **OR**
- A notarized copy of a valid U.S. Coast Guard Merchant Marine Identification Card, **OR**
- A notarized copy of a valid Native American Tribal Document, **OR**
- A notarized copy of a valid certificate verifying naturalized status, bearing the applicant's intact photograph, issued by an authorized agency of the United States, **OR**
- A notarized copy of a valid certificate verifying United States citizenship, bearing the applicant's intact photograph, issued by an authorized agency of the United States.

The notary public seal must be placed on the same page that contains a photocopy of your photo I.D. **Do not** tape/glue a copy of your photo I.D. to the notary seal page. Applications with tape/glue on pages will be returned resulting in delays of the application process.

**Please use the following page for the notarization of your photo I.D.**

**\*This requirement must be met only ONCE.**

According to Colorado Revised Statute 12-55-120, a notary public may certify a facsimile (copy) of a document if the original of the document is exhibited to him/her, together with a signed written request.

# Photocopy I.D. directly on this page

(Do not tape or paste a copy of your photo I.D. on this page)



State of \_\_\_\_\_, County (or city) of \_\_\_\_\_

I, \_\_\_\_\_, a Notary Public in and for said state,  
(name of notary)

do certify that on \_\_\_\_\_, I carefully compared with the original,  
(Date)

this copy of \_\_\_\_\_,  
(type of document, i.e. Colorado or Out-of-State Driver's License, U.S. Passport on the top of this page (see previous page for list of acceptable photo I.D).)

and have determined it to be a complete, full, true, and exact copy.

\_\_\_\_\_  
(Official signature, official seal, and commission **expiration date** of notary public)

# Checklist: Three-Year Substitute Authorization

Please use the following checklist when compiling the application materials. All required data on the application must be complete, including dates and signatures. **Failure to complete all required items on the application will result in the application being returned without action.**

1. \_\_\_\_\_ Page 11. Sections A, B, C and D must all be completed by applicant with original signatures as required. The original form must be signed and dated. **Section D must be signed and dated to avoid having the application returned without action.**
2. \_\_\_\_\_ Pages 12 and 13, the Oath and Consent Form. Please complete, sign, date and attach documentation, if required. Please answer all questions. **Page 13 must be signed and dated to avoid having the application returned without action.**
3. \_\_\_\_\_ Page 14, Affidavit Form signed and dated by applicant (**does not have to be notarized**).
4. \_\_\_\_\_ Page 15 and 16, **Notarized** form (with notary expiration date) of acceptable identification to verify lawful presence (Page 16 **only** be notarized).
5. \_\_\_\_\_ Official Transcripts from the college or university where the Bachelor's degree was completed showing degree was conferred or awarded. An official transcript bears the seal of the institution and the signature of the registrar. Official transcripts with the registrar's seal and stamped "Issued to the Student" will be accepted. Grade reports, photocopies, and letters from faculty members are not acceptable. Transcripts may be out of the official sealed envelope. **DO NOT have transcripts sent directly to the Department of Education.**

(NOTE: Renewal applications for the Three-Year Substitute Authorization do not require official transcripts)

6. \_\_\_\_\_ CDE requires official documentation from an applicant prior to making a name change for that person. Please provide a photocopy of the marriage license, divorce decree or court document verifying the name change, if you have held a previous license or authorization issued by CDE.
7. \_\_\_\_\_ Non-refundable application processing fee of **\$60.00 (see page 19)** paid using the CDE on-line payment system. Applicant will be issued a **Receipt Number** at the time of payment. That receipt number **must** be written on the **first page** of your application. Please include a copy of your **Receipt Page** (download from the on-line payment page) with your application. Debit or Credit Card payments cannot be made in person.
8. \_\_\_\_\_ A completed CDE fingerprint card and processing fee must be submitted directly to the Colorado Bureau of Investigation prior to application.\* Please see page 18 for instructions. **Your authorization cannot be issued until CDE has received your criminal history record check from CBI.**

\*Submission of a fingerprint card is required unless you have previously submitted a fingerprint card for licensure to CDE.

Keep a copy of your application for your records.

Prior to submission of your application, review for completion and remove all instruction/checklist sheets.

Applications are evaluated in the order received. Processing takes several weeks.

You can check the status of your application online at:

<https://forms.cde.state.co.us/pes/DOBSearch.jsp>

Send the completed application to:

Educator Licensing, Colorado Department of Education, 201 E. Colfax Ave. Room 106, Denver, CO 80203

# Application: Three Year Substitute Authorization

**Section A** (Please print or type) To be completed by applicant. License will be issued in legal name.

Legal Name Last	First	Middle	Maiden/Former Name
Mailing Address			Date of Birth
City	State	Zip	Social Security Number
Telephone Work (    ) _____ Home (    ) _____			Write your 6-digit receipt number here. Please attach a copy of your Payment Receipt.  _____
Email Address			

Are you a Military spouse? **Yes**  **No**

Did you submit a CDE-approved fingerprint card to CBI? When? \_\_\_\_\_ CBI is taking approximately 10-12 weeks to process fingerprint cards. We must receive your CBI report before we can complete your application evaluation.

**Section B** To be completed by applicant.

Do you hold a standard educator license, certificate, authorization or credential from another state? **Yes**  **No**   
 If yes, attach a copy or provide the following information:

State \_\_\_\_\_ Title of license/certificate held \_\_\_\_\_ Effective/Expiration date \_\_\_\_\_

Please indicate if this is a renewal of a three-year substitute application: **Yes**  **No**

**Section C** To be completed by applicant. List all K-12 school employment within the last five years in specialization area.

Employment Dates Mo./Year – Mo./Year	Employer	Assignments Or Duties

**Section D** To be completed by applicant.

### Affidavit

I, \_\_\_\_\_, affirm under penalty of perjury under  
(PRINT NAME)  
 the laws of the State of Colorado that all information included in this application is true and correct.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Do not write in this space. For Licensing Office only.**

**Type of Authorization:**

**Effective Date:**

**Approved By:**



# Oath and Consent Form

All questions must be answered. All documentation requested must accompany this application.

**To be completed by the applicant. Please print or type**

Legal Name	Last	First	Middle	Maiden/Former Name
Mailing Address	Number and Street		Apt. #	Date of Birth
				Month _____ Day _____ Year _____
City	State	Zip		Social Security Number
Telephone				Email address
Work ( ) _____	Home ( ) _____			

Please list all former names you have used and approximate dates of use.  
(If more than three, list on a separate sheet of paper)

Name	Date
Name	Date
Name	Date

1. Have you ever been convicted of a felony or misdemeanor (other than a misdemeanor traffic offense or traffic infraction)?

Yes                       No

If yes, please include with your application a copy of the police report, copies of the charging document, and the disposition document from the court for each conviction.

For the purposes of this question, "convicted" is defined as the occurrence of **ANY** of the following in connection with a criminal charge:

1. A finding of guilty by a jury or court.
2. A court's acceptance of a plea of guilty or a plea of nolo contendere.
3. A court's imposition of a deferred or suspended sentence.
4. A court's approval of an agreement for a deferred prosecution.
5. Forfeiture of a bail, bond or other security deposited to secure a defendant's appearance.
6. Payment of a fine.

Please specify the offense(s) for which you were convicted (including whether this was a felony or misdemeanor), along with the date of conviction and the court entering the judgment of conviction.

Offense	Felony/ Misdemeanor		Conviction Date	Court and Location
	F	M		
	F	M		
	F	M		
	F	M		
	F	M		

2. Have you ever had a teacher, principal, administrator or special services license, certificate or authorization, or any other occupational permit, license, credential or equivalent document subjected to any disciplinary proceedings, including, but not limited to, annulment, denial, reprimand/admonition, suspension or revocation, or have you ever voluntarily surrendered such a document in Colorado or any other state or place, or are you currently under investigation by any licensing or credentialing agency or organization?

Yes

No

If yes, please provide the following information on a separate sheet of paper:

- the type of license, permit, certificate, credential, or any other equivalent documents;
- the name and number under which it was held;
- the issuing and disciplining authority;
- the nature of the charges;
- the date of resolution;
- the final disposition, e.g., revocation or suspension; and
- the date and result of any subsequent re-application.

If you are currently under investigation by any licensing or certifying agency, please state:

- the agency's name and address; and
- the nature of the charge(s) or events that caused such investigation to occur.

3. Have you ever been dismissed or discharged, or have you resigned in order to avoid discipline or discharge, by any employer?

Yes

No

If yes, then state on a separate sheet of paper the name, address, and telephone number of the employer, your dates of employment, the nature of the allegations/grounds for separation and the final disposition.

I hereby attest that all information I am submitting is true and complete to the best of my knowledge. I understand that any intentional misrepresentation of facts may result in denial or annulment of a license and that falsification of statements on and with this attestation may be punishable by law. I authorize law enforcement agencies, courts, offices of prosecuting attorneys, and custodians of employment, school district, military, and licensure records to disclose to the **Colorado Department of Education** information from the records in their possession. I further authorize these agencies to permit the examination and to furnish copies of all records and other reports in their possession and control. I understand that the specific type of information to be disclosed includes reports of any kind contained in my record file, regardless of their origin.

\_\_\_\_\_  
Signature of the Applicant

\_\_\_\_\_  
Date



## Colorado Department of Education

### C.R.S. 24-76.5-103

*Pursuant to Section 24-76.5-103, Colorado Revised Statutes, only persons lawfully present in the United States will be issued a Colorado educator license or authorization. (This includes adding an endorsement or renewing a license or authorization.) Each applicant for a Colorado educator license or authorization must complete, sign and return the following affidavit, with the completed application packet.\**

## AFFIDAVIT

I, \_\_\_\_\_, swear or affirm under penalty of perjury under the laws of the State of Colorado that:

**(check only one box)**

- I am a United States citizen, or
- I am a Permanent Resident of the United States, or
- I am lawfully present in the United States pursuant to Federal law.

I understand that this sworn statement is required by law because I have applied for an educator license or authorization with the State of Colorado. I understand that State law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*This requirement must be met only **ONCE**.

# VERIFICATION OF LAWFUL PRESENCE

## Compliance with the Provisions of Colorado Revised Statute (CRS) 24-76.5-103

Pursuant to Section 24-76.5-103, Colorado Revised Statutes, only persons lawfully present in the United States will be issued a Colorado educator license or authorization. (This includes adding an endorsement or renewing a license or authorization.) Each applicant for a Colorado educator license or authorization must provide the Colorado Department of Education with an accepted form of identification at the time of application. January, 2007\*

This memo details the requirements which must be met for an applicant to comply with CRS 24-76.5-103 - *Verification of Lawful Presence in the United States*.

### I. **IF THE COMPLETED APPLICATION IS BEING SUBMITTED BY MAIL:**

A **NOTARIZED** copy of *one* of the following must be submitted with the completed application and supporting documents:

#### **Acceptable Documentation for Verification of Legal Residence:**

- A notarized copy of a valid State-issued Driver's License, bearing the applicant's photograph, **OR**
- A notarized copy of a valid State-issued Identification Card, bearing the applicant's photograph, **OR**
- A notarized copy of a valid United States passport, **OR**
- A notarized copy of a valid U.S. Military or Military Dependent Identification Card, **OR**
- A notarized copy of a valid U.S. Coast Guard Merchant Marine Identification Card, **OR**
- A notarized copy of a valid Native American Tribal Document, **OR**
- A notarized copy of a valid certificate verifying naturalized status, bearing the applicant's intact photograph, issued by an authorized agency of the United States, **OR**
- A notarized copy of a valid certificate verifying United States citizenship, bearing the applicant's intact photograph, issued by an authorized agency of the United States.

The notary public seal must be placed on the same page that contains a photocopy of your photo I.D. **Do not** tape/glue a copy of your photo I.D. to the notary seal page. Applications with tape/glue on pages will be returned resulting in delays of the application process.

**Please use the following page for the notarization of your photo I.D.**

**\*This requirement must be met only ONCE.**

According to Colorado Revised Statute 12-55-120, a notary public may certify a facsimile (copy) of a document if the original of the document is exhibited to him/her, together with a signed written request.

# Photocopy I.D. directly on this page

(Do not tape or paste a copy of your photo I.D. on this page)



State of \_\_\_\_\_, County (or city) of \_\_\_\_\_

I, \_\_\_\_\_, a Notary Public in and for said state,  
(name of notary)

do certify that on \_\_\_\_\_, I carefully compared with the original,  
(Date)

this copy of \_\_\_\_\_,  
(type of document, i.e. Colorado or Out-of-State Driver's License, U.S. Passport on the top of this page (see previous page for list of acceptable photo I.D)).

and have determined it to be a complete, full, true, and exact copy.

\_\_\_\_\_  
(Official signature, official seal, and commission **expiration date** of notary public)

## Transcripts...

- Only official transcripts will be accepted. An official transcript bears the seal of the institution and the signature of the registrar. Official transcripts with the registrar's seal and stamped "Issued to the Student" will be accepted. *All transcripts must be included with your application.* Grade reports and letters from faculty members are not acceptable. Do not have transcripts sent directly to the Department of Education. Transcripts may be out of the official sealed envelope.
- Photocopies of transcripts will not be accepted. CDE will not provide photocopies of your official transcripts. Additional copies of your transcripts for employment and other needs should be requested from the college or university registrar.
- Transcripts submitted for licenses and authorizations become the property of the Colorado Department of Education. Only the transcript showing the Bachelor's Degree was conferred need to be included with your application.

## Foreign Transcripts...

The Colorado Department of Education does not determine degree, credit, and program equivalencies for persons with credentials from outside the United States, except for Canadian transcripts which are in English. Please work directly with a recognized credentials evaluation agency and include the appropriate evaluation with your application. **Request a course by course evaluation.** Agencies should be members of the National Association of Credential Evaluation Services (NACES).

The following are the names and addresses of two acceptable credential evaluation services:

World Education Services, Inc.  
P.O. Box 11623  
Chicago, IL 60611-0623  
Telephone: (312) 222-0882  
<http://www.wes.org>

Educational Credential Evaluators, Inc.  
P.O. Box 514070  
Milwaukee, WI 53203-3470  
Telephone: (414) 289-3400  
<http://www.ece.org>

CDE will also accept equivalency evaluations from all members of NACES. Their website address is [www.naces.org](http://www.naces.org)

## Evaluation...

The Colorado Department of Education will evaluate your complete application according to Colorado State Board of Education standards. Plan ahead. Apply well in advance of the date of anticipated employment.

Fees submitted for evaluations are not refundable and are valid for one year from the date they were originally received by CDE.

## **Criminal History Record Check**

### **Fingerprinting**

*Prior to submission of an application to the Colorado Department of Education each applicant shall submit to the Colorado Bureau of Investigation (CBI) a complete set of fingerprints . . . taken by a qualified law enforcement agency . . . for the purpose of obtaining a finger-print based criminal history check.*

Effective 1/25/2010 the process for submission of a set of fingerprints requires that the applicant:

- Use a fingerprint card provided by a local Law Enforcement Agency (CDE no longer provides cards)
- Complete the fingerprint card with the assistance of a qualified Law Enforcement Agency
- Submit the completed fingerprint card, with processing fee, to the Colorado Bureau of Investigation

Specific instructions on filling out the fingerprint card may be found at:

<http://www.cde.state.co.us/cdeprof/download/pdf/fpinfosheet.pdf>

## Educator Licensing Fee Information

The Colorado State Board of Education annually sets fees for all applications, licenses, authorizations, and additional endorsements issued by the Colorado Department of Education.

- Applicants are required to make an on-line payment using a Credit Card (Visa, MasterCard, American Express, etc.) or Debit Card.
- Applicant will be issued a **Receipt Number** at the time of payment. That receipt number **must** be written on the **first page** of your application. Please include a copy of your **Receipt Page** (download from the on-line payment page) with your application.

**Log on to the payment website to pay your evaluation fee at:**

<http://www.colorado.gov/edlicense60>

All on-line payments must be made on the website listed above. This process must be completed **prior** to submitting an application to CDE. Please **do not** forget to download your **Receipt** page and include a copy of the **Receipt** page with your application.

## Please select the \$60.00 license fee

### **BEGINNING AUGUST 1, 2008:**

- On-line payments will be the **ONLY** payment option for licensing fees.
- Credit or Debit Card payments may be made in person.
- All other payment forms will be discontinued.