



Temporary Educator Eligibility Verification Form

DIRECTIONS

Applicant: 1. Complete Section A and forward this form to your college/university advisor for completion of Section B, if applicable. 2. Forward this form to the Director of Special Education at your employing school district/BOCES/facility school or state-operated program for completion of Section C. 3. Upload the completed and signed form into your application prior to submission to CDE.

College/University: Complete Section B in its entirety and return to the applicant.

School District/BOCES/Facility School/State-Operated Program: Complete Section C in its entirety and return to the applicant.

Section A To Be Completed by the Applicant

Form section A containing fields for name, address, social security number, and license information.

Indicate the pathway you will pursue to meet licensure endorsement requirements: (select one)

Form section with radio button options 1, A, B, C for licensure pathways.

Section B To Be Completed by the College/University

Form section B containing fields for year selection, college name, address, and signature.

Section C To be Completed By the School District/BOCES/Facility School or State-Operated Program

Form section C containing fields for school official name, title, date, and signature.