

**SPECIAL, NON-RENEWABLE LICENSE LOCAL
DISTRICT REQUEST APPLICATION PACKET**

PROSPECTIVE NON-TRADITIONAL TEACHER PREPARATION PROGRAM COMPLETERS

General Information and Guidelines

The special, non-renewable license for prospective non-traditional teacher preparation program completers is a one-year license that can only be requested by an employing local school district or an eligible nonpublic school in the state of Mississippi for up to three (3) years for a candidate who has not met all certification requirements under the Miss. Code Ann. § 37-3-2(6)(a), (b), and (c), at the time the application is submitted to the Office of Educator Licensure. The special, non-renewable license for prospective non-traditional teacher preparation program completers provides local school officials with the ability to employ a candidate who has the potential to obtain a standard Mississippi teaching license by the completion of a Mississippi State Board of Education approved alternate route teacher education preparation program.

This provisional licensure option provides local school district officials with the ability to employ candidates who possess the potential to earn full educator certification while temporarily addressing the ongoing teacher shortage.

This Special, Non-renewable License type can be requested for a prospective non-traditional teacher preparation program completer who meets one of the following conditions in addition to criteria outlined in the subsequent sections based on application year:

A. Holds at least a bachelor's degree in the endorsement area in which the license is requested from an institution of higher education that was regionally/nationally accredited at the time the degree was conferred; **or**

B. Holds at least a bachelor's degree in any area and twenty-one (21) hours of undergraduate and/or graduate level coursework with a grade of "C" or higher in the endorsement area in which the license is requested. Both the degree(s) and the twenty-one (21) hours of undergraduate and/or graduate level coursework must have been earned from an institution of higher education that was regionally/nationally accredited at the time the degree was conferred. Remedial courses (also referred to as compensatory, developmental, or basic skills) will not be recognized for certification purposes and are usually numbered below 100 on the transcript (**Elementary Education is not included under option B**); **or**

C. Holds at least a bachelor's degree in any area from an institution of higher education that was regionally/nationally accredited at the time the degree was conferred and a passing score on the appropriate Mississippi State Board of Education approved licensure Subject Area Assessment in the endorsement area in which the license is requested;

The candidate must meet all licensure requirements for a standard, five (5) year renewable license by the end of the third year.

Specific restrictions apply:

- The license is not transferable between Districts or eligible nonpublic schools. For example, if a candidate is employed one (1) year and wishes to transfer to another school district, the license is no longer valid, unless a new Local District Request Application is received by the Office of Educator Licensure from the local district to which the candidate is transferring. If the educator is nonrenewed by the local school district after the first year, the educator will not be issued a license for another district for the remaining two (2) years.
- The license can only be requested in one (1) endorsement area.
- Additional endorsements will not be added to the special, non-renewable license.

Obtaining the initial Special, Non-renewable License for prospective non-traditional teacher preparation program completers requires completion of the application process as outlined below in the Year One category. Subsequent year requirements addressing verification of progress toward the standard, five (5) year renewable license are specified under the Year Two and Year Three categories.

Year One Documentation Requirements

The employing local school district or eligible nonpublic school must submit the following documentation for each candidate who meets the following criteria to be granted the year one special, non-renewable license:

- a) Standard Mississippi Licensure Application; **and**
- b) Local District Request Packet; **and**
- c) Letter of Request and Justification; **and**
- d) Vita or résumé; **and**
- e) Official, sealed transcript showing completion of at least bachelor's degree from an institution of higher education that was regionally/nationally accredited at the time the degree was conferred; **and**
- f) Official, sealed transcript showing degree conferred in the endorsement area in which the license is requested; **or**
- g) Official, sealed transcript(s) documenting twenty-one (21) hours of undergraduate and/or graduate level coursework with a grade of "C" or higher in the endorsement area in which the license is requested; **or**
- h) Official test score report(s) documenting a passing score on the appropriate Mississippi State Board of Education approved licensure Subject Area Assessment in the endorsement area in which the license is requested.

Year Two Documentation Requirements

The employing local school district or eligible nonpublic school must submit documentation indicating that the special, non-renewable license holder is making sufficient progress toward the completion of requirements for obtaining full state certification to be granted the year two special, non-renewable license:

- a) Official test score report(s) documenting achievement of qualifying passing scores on all required applicable Mississippi State Board of Education approved testing requirements; **and**
- b) Official letter of unconditional acceptance to a Mississippi State Board of Education approved non-traditional teacher preparation program from the appropriate State Board approved program provider. The Mississippi teacher preparation program provider must ensure that the candidate has met all minimum admission requirements prior to enrolling the candidate in the non-traditional teacher preparation program-- Official letter must be completed by the Dean of Education or Certification Officer; **and**
- c) Standard Licensure Application; **and**
- d) Local District Request Packet; **and**
- e) Letter of Request and Justification.

Year Three Documentation Requirements

The employing local school district or eligible nonpublic school must submit documentation indicating that the special, non-renewable license holder is making sufficient progress toward the completion of requirements for obtaining full state certification to be granted the year three special, non-renewable license:

- a) Official test score results from attempt(s) to meet all testing requirements during the time the year two Special, Non-renewable License was valid (only applicable if year two license was held during 2017-2018 school year); **and/or**
- b) Official letter of unconditional acceptance into a Mississippi State Board of Education approved non-traditional educator preparation program from the appropriate State Board approved program provider. The Mississippi educator preparation program provider must ensure that candidate has met all minimum admission requirements prior to enrolling the candidate in the non-traditional educator preparation program-- Official letter must be completed by the Dean of Education or Certification Officer (only applicable if year two license was held during 2017-2018 school year); **and**
- c) Official, sealed transcript showing required course(s) status as “in progress” or “completed” with an earned grade of “C” or higher. Evidence of program progress and/or completion must reflect acceptable forms of documentation based on the specific non-traditional educator preparation program being completed; **and**
- d) Standard Licensure Application; **and**
- e) Local District Request Packet; **and**
- f) Letter of Request and Justification.

NOTE: Educator preparation program providers shall ensure that candidates have met all requirements in effect at the time the application for admission to a Mississippi State Board of Education approved non-traditional educator preparation program is received. Requirements include, but are not limited to, the following: (To obtain the most accurate and up-to-date requirements, please visit the Educator Licensure Section at www.mde.k12.ms.us/k12.org/OEL)

- a) The candidate must hold at least a bachelor’s degree from an institution of higher education that was regionally/nationally accredited at the time the degree was conferred; **and**
- b) The candidate must present official score report(s) from the appropriate testing vendor documenting earned passing qualifying scores on all required non-traditional educator preparation program admission and licensure tests such as, Praxis Core Academic Skills for Educators*, or minimum score of Twenty-one (21) ACT equivalent, Praxis Subject Assessment(s)** in the area in which the educator license is sought, and Foundations of Reading Assessment (if applicable to area of certification sought) ***.

*Candidate must have achieved the Mississippi State Board of Education’s approved Minimum Passing Score requirement for Reading, Writing, and Mathematics prior to non-traditional program admission.

**Candidate must have achieved the Mississippi State Board of Education’s approved Minimum Passing Score requirement for test(s) in the area in which the educator license is sought prior to non-traditional program admission.

***Candidate must have achieved the Mississippi State Board of Education’s approved Minimum Passing Score requirement for Foundations of Reading assessment prior to non-traditional program admission for Elementary Education (4-6) certification.

Meeting all testing requirements is but one criterion for completing the multi-step educator licensure process for obtaining full state certification in the state of Mississippi. Please visit the Educator Licensure Section of the MDE website to obtain the most accurate and up to date information.

Mailing Address:

Mississippi Department of Education
Office of Educator Licensure
P. O. Box 771
Jackson, MS 39205-0771

Delivery Address:

Mississippi Department of Education
Office of Educator Licensure
359 N. West Street, Suite 101
Jackson, MS 39201

- Incomplete or faxed application packets will not be processed.

LICENSURE APPLICATION
Prospective Non-Traditional Special, Non-Renewable License

APPLICANT INFORMATION (PRINT LEGIBLY)

Social Security Number: _____		Email Address: _____									
Name: _____		_____									
<i>Last</i>		<i>First</i>									
Address: _____		_____									
<i>Street/P.O. Box</i>		<i>Apt./Unit Number</i>									
_____		_____									
<i>City</i>		<i>State</i>									
<i>Zip Code</i>											
Telephone Number: _____		Birth Date: _____									
		Gender: _____									
<p>Ethnicity: (Used for statistical purposes and to provide information required by the U.S. Department of Education in accordance with applicable federal regulations. Your cooperation in providing this information is appreciated.)</p> <table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> American Indian</td> <td><input type="checkbox"/> Alaskan Native</td> <td><input type="checkbox"/> Asian</td> <td><input type="checkbox"/> Black—non-Hispanic</td> </tr> <tr> <td><input type="checkbox"/> White—non-Hispanic</td> <td><input type="checkbox"/> Hispanic</td> <td><input type="checkbox"/> Pacific Islander</td> <td><input type="checkbox"/> Other</td> </tr> </table>				<input type="checkbox"/> American Indian	<input type="checkbox"/> Alaskan Native	<input type="checkbox"/> Asian	<input type="checkbox"/> Black—non-Hispanic	<input type="checkbox"/> White—non-Hispanic	<input type="checkbox"/> Hispanic	<input type="checkbox"/> Pacific Islander	<input type="checkbox"/> Other
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CHARACTER DETERMINATION

Check “Yes” or “No” to each	
___ Yes ___ No	1. Are you currently addicted or currently dependent on alcohol?
___ Yes ___ No	2. Are you currently addicted or currently dependent on other habit-forming drugs?
___ Yes ___ No	3. Are you a habitual user of narcotics, barbiturates, amphetamines, hallucinogens, or other drugs having similar effects?
___ Yes ___ No	4. Have you been convicted or pled guilty to a felony as defined by federal or state law? ** (For the purpose of this question, a “guilty plea” includes a plea of guilty, entry of a plea of nolo contendere, or entry of an order granting pretrial or judicial diversion.)
___ Yes ___ No	5. Have you been convicted or pled guilty to a sex offense as defined by federal or state law? ** (For the purpose of this question, a “guilty plea” includes a plea of guilty, entry of a plea of nolo contendere, or entry of an order granting pretrial or judicial diversion.)
___ Yes ___ No	6. Are you currently on probation or post-release supervision for a felony or sex offense conviction as defined by federal or state law? **
___ Yes ___ No	7. Have you had a certificate/license denied, suspended, and/or revoked by MS or another state? Have you voluntarily surrendered a certificate/license?
<p>** If you answered “Yes” to any of the above, provide on a separate sheet of paper the specifics or an explanation for the response. If you elect not to provide specifics or if such an explanation is insufficient, a confidential investigation will be initiated.</p> <p>** If you answered “Yes” to any of the above, submit official copies of court record including disposition of case.</p>	

I acknowledge that securing or attempting to secure a license by fraud or deceit will result in denial of this application or suspension of the license.

Signature: _____

Date: _____

Mail application to: MS Dept. of Education • Office of Educator Licensure • P.O. Box 771 • Jackson, MS 39205-0771

**LOCAL DISTRICT REQUEST
SPECIAL, NON-RENEWABLE LICENSE**

1. Name: _____
Last First Middle/Maiden

2. Social Security Number: _____

3. License Number: _____

4. Degree: _____

5. Specify the school year for which the license is requested (i.e., 2018-2019):

6. Special, Non-Renewable License Year:

Year One Request: _____

Year Two Request: _____

Year Three Request: _____

7. License Requested:

Endorsement Code: _____ Endorsement Name: _____

8. District Name: _____

9. District Address: _____

10. District Code: _____

11. District Telephone Number: _____

12. Reason(s) for this request: _____

SUPERINTENDENT'S STATEMENT

I, superintendent of the above-named school district, verify that there is not a qualified applicant available for the position for which this license is requested.

Action approved by the Board of Trustees of the School District (if required) on _____
Date

Superintendent's Signature: _____ Date: _____