SPECIAL, NON-RENEWABLE LICENSE LOCAL DISTRICT REQUEST APPLICATION PACKET

TRADITIONAL TEACHER PREPARATION PROGRAM COMPLETERS General Information and Guidelines

The special, non-renewable license for 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 traditional teacher preparation program completers provides local school district officials with the ability to employ a candidate who has completed all requirements of a state approved or NCATE/CAEP accredited traditional teacher education preparation program from a regionally/nationally accredited institution of higher education except achieving a passing score on all Mississippi required licensure tests.

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 specific 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 specific 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 a Traditional teacher education preparation program documenting successful completion of student teaching experience with an earned grade of "C" or higher. Transcript must indicate the date on which 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. Sufficient evidence includes the following for the specific Traditional teacher education program completer:

- a) Official test score report(s) documenting attempt(s) to achieve a qualifying passing score on all required applicable Mississippi State Board of Education approved testing requirements during the time the year one Special, Non-renewable License was valid; **and**
- b) Standard Licensure Application; and
- c) Local District Request Packet; and
- d) 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. Sufficient evidence includes the following for the specific Traditional teacher education preparation program completer:

- a) Official test score report(s) documenting attempt(s) to achieve a qualifying passing score on all required applicable Mississippi State Board of Education approved testing requirements during the time the year two Special, Non-renewable License was valid; **and**
- b) Standard Licensure Application; and
- c) Local District Request Packet; and
- d) Letter of Request and Justification.

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 Specific Traditional Special, Non-Renewable License

APPLICANT INFORMATION (PRINT LEGIBLY)

Social Security Number:	Email Addre	Email Address:				
Name:						
Last	Fi	rst	Middle/Maiden			
Address:						
Street/P.O. Box			Apt./Unit Number			
City		State	Zip Code			
Telephone Number:	Birth Da	te:	Gender:			
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.)						
□ White—non-Hispanic	□ Hispanic	□ Pacific Islander	□ Diack—non-rinspanie □ Other			

CHARACTER DETERMINATION

Check "Yes" or "No" to each					
YesNo	1. Are you currently addicted or currently dependent on alcohol?				
YesNo	2. Are you currently addicted or currently dependent on other habit-forming drugs?				
YesNo	3. Are you a habitual user of narcotics, barbiturates, amphetamines, hallucinogens, or other drugs having similar effects?				
YesNo	 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.) 				
YesNo	 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.) 				
YesNo	6. Are you currently on probation or post-release supervision for a felony or sex offense conviction as defined by federal or state law? **				
Ye sNo	7. Have you had a certificate/license denied, suspended, and/or revoked by MS or another state? Have you voluntarily surrendered a certificate/license?				
** 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.					
** If you answered "Yes" to any of the above, submit official copies of court record including disposition of case.					

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 Yea	ar:	
	Year One Request:		
	Year Two Request:		
	Year Three Request:		
7.	License Requested: Endorsement Code: I	Endorsement Name:	
8.	District Name:		
9.	District Address:		
1(D.District Code:	11. District Telephone Numb	
12	2. Reason(s) for this request:		
_		JPERINTENDENT'S STATEMENT	
	superintendent of the above-named sch sition for which this license is request	nool district, verify that there is not a qua ed.	alified applicant available for the
A	ction approved by the Board of Trustee	es of the School District (if required) on_	

Date

Superintendent's Signature: _____ Date: _____