



SAN MATEO COUNTY BTSA / INDUCTION PROGRAM

APPLICATION FOR CLEAR MULTIPLE, SINGLE SUBJECT OR EDUCATION SPECIALIST CALIFORNIA TEACHING CREDENTIAL

SSN: _____ - _____ - _____

Date of Birth: _____ / _____ / _____
mm/dd/yy

Name: _____
(First) (Middle) (Last)

Mailing Address: _____

Phone: _____

E-mail Address: _____
(Please do not use an AOL e-mail address)

Employing School District: _____

Preliminary Credential Information: (Please refer to your credential document to answer the questions below.)

I currently hold a preliminary (choose all that apply)

Multiple Subject Credential	Expiration Date: _____
Single Subject Credential	Expiration Date: _____
Education Specialist	Expiration Date: _____

My document designates that I am authorized to teach English Language Learners:
Yes No

List all authorized subjects or disability areas shown on your current preliminary credential.

- | | |
|----------|----------|
| 1) _____ | 2) _____ |
| 3) _____ | 4) _____ |
| 5) _____ | 6) _____ |

Professional Fitness: Please respond to the following professional fitness question. (This information will be requested again, but in greater detail, as part of your online application process with the Commission.)

Have you ever been the subject of credential discipline, or have you ever had any criminal convictions (misdemeanors and/or felonies)? Yes No

Applicant's Statement: I affirm that the above information is true and factual.

Applicant's Signature: _____ Date: _____

For County Use: R14D R14I R14R R14S PRO RC REL
R19J R19L R19M R19N R19____

ELA1 2042 1059 CLAD EMP BCLAD EMP
READ US CONS SUBJ MATT H/CPR COMP 1 COMP 2
MAIN

Application File Date: _____