

# GaPSC Initial Certificate and License Application for Employed Educators

**This application and all supporting documents must be submitted to the GaPSC through ExpressLane by your employer  
DO NOT MAIL!**

**Initial Certificate/License Requested:**

<input type="radio"/> <b>Adjunct License</b>	<input type="radio"/> <b>Clearance Certificate</b> – <i>If in-field certification is waived using charter or strategic waiver.</i>
<input type="radio"/> <b>International Exchange</b>	<input type="radio"/> <b>Certificate based on reciprocity</b> ( <i>holding a professional certificate in another state</i> )
<input type="radio"/> <b>Educational Interpreter License</b>	<input type="radio"/> <b>Certificate based on out-of-state program</b> ( <i>completion of an educator preparation program in another state</i> )
<input type="radio"/> <b>Non-Instructional Aide License</b>	<input type="radio"/> <b>Permit</b>
<input type="radio"/> <b>Paraprofessional License</b>	<input type="radio"/> <b>Provisional Certificate</b>
<input type="radio"/> <b>Support Personnel License</b>	<input type="radio"/> <b>Waiver</b>

**1. Print your LEGAL NAME and use dark ink.**

Title \_\_\_\_\_ Last Name \_\_\_\_\_  
 Mr.  Ms.  Dr. \_\_\_\_\_

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_  
 \_\_\_\_\_

Social Security Number or GaPSC Certification ID \_\_\_\_\_ Date of Birth (MM/DD/YY) \_\_\_\_\_  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Mailing Address \_\_\_\_\_  
 \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ - \_\_\_\_\_  
 \_\_\_\_\_

Primary Telephone \_\_\_\_\_ Alternate Telephone \_\_\_\_\_  
 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Email Address (required): \_\_\_\_\_

**2. Field(s) Requested (if applicable).**

\_\_\_\_\_

**3. Academic Record (Not required for Clearance Certificate or Support Personnel License applicants).**

List on the following page and attach **official** transcripts from **all** U.S. colleges/universities and Georgia Professional Learning programs attended. For Paraprofessionals with testing, or Non-Instructional Aides, only a copy of a high school diploma/GED is required.

- Mailed transcripts are not accepted and will not be returned if mailed in error.
- Transcripts not submitted electronically by an employer must be sent electronically directly from the college/university, through a secure parchment service, or emailed directly from the institution to [mail@gapsc.com](mailto:mail@gapsc.com) (**this address is for electronic transcripts only and not monitored for correspondence**)
- Electronic transcripts submitted by employers must reflect their agency as the recipient. Electronic transcripts forwarded to an employer from an educator will not be accepted.
- Unofficial copies of college transcripts will not be accepted.
- If you have attended institutions **outside the United States**, please do not submit those official transcripts. Please submit a detailed course-by-course foreign credential evaluation report completed by an acceptable credentialing agency found on [the GaPSC website](#).

Education Level (select all that apply)	Name of College/Institution	Completion Date
<input type="radio"/> High School Diploma or GED		
<input type="radio"/> One year of college		
<input type="radio"/> Two years of college (at least 60 semester hours)		
<input type="radio"/> Associate's degree		
<input type="radio"/> Bachelor's degree		
<input type="radio"/> Master's degree		
<input type="radio"/> Specialist degree		
<input type="radio"/> Doctorate degree		
<input type="radio"/> Other (certification-only, non-degree, etc.)		

Please list **any other name(s)** under which your transcript(s) may be listed: \_\_\_\_\_

4. **Certification Record:** List **ALL valid or expired professional educator certificates/licenses** issued by **another** state, country, the District of Columbia, the Department of Defense Education Activity (DoDEA), or the National Board for Professional Teaching Standards (NBPTS). For each state or jurisdiction, list the certificate/educator identification number if available. If the certificate cannot be verified on a public website, your employer must submit a copy of the front and back of the certificate.

State/Jurisdiction	Certificate/Educator Identification Number	Validity Period	Publically Verifiable on the State's Website (Y/N)

Have you ever worked full-time on a professional educator certificate?  Yes  No *If yes, your employer must include a complete Experience Verification form for qualifying experience as described on the form.*

Are you or your spouse an active duty U.S. military member?  Yes  No *If yes, your employer must include a copy of a valid U.S. military ID.*

5. **Assessment Record:** List any **content/subject matter assessment(s)** you have passed as a requirement for certification **outside of Georgia**. Your employer must submit copies of all score reports. If score reports are not available, an official letter from a state certification agency confirming the dates on which you passed each test will be accepted. Online screenshots of personal testing accounts **will not be accepted**.

Check here if you were not required to pass any content/subject matter certification assessments.

State/Jurisdiction	Assessment Title	Date Passed

6. **Personal Affirmation:** The applicant should enter a truthful "Yes" or "No" response to each of the following questions. All questions must have a response in order for the application process to continue. "YES" responses automatically open an investigation and require an explanation along with any additional supporting documentation. This additional documentation should be submitted to the GaPSC Ethics Division and should **NOT** be submitted via ExpressLane. **DO NOT include matters that the GaPSC has investigated or is currently investigating.**

- 1. Have you ever had an adverse action (*i.e. warning, reprimand, suspension, revocation, denial, voluntary surrender, disbarment*) taken against a professional certificate, license or permit issued by an agency **OTHER THAN the Georgia Professional Standards Commission?**
- 2. Are you currently the subject of an investigation involving a violation of a profession's laws, rules, standards or Code of Ethics by an agency **OTHER THAN the Georgia Professional Standards Commission?**
- 3. Have you ever received a less than honorable discharge from any branch of the armed services? (*If "yes", provide a copy of form DD214.*)
- 4. While under investigation, have you ever left an employment position (*retired, resigned, been dismissed, terminated, non-renewed or otherwise*)?
- 5. Are you currently the subject of an investigation involving sexual misconduct or physical harm to a child?
- 6. Are you the subject of a pending investigation involving a criminal act?
- 7. For any **felony** or any **crime involving moral turpitude**, have you ever:
  - ◆ Pled guilty;
  - ◆ Entered a plea of *nolo contendere*;
  - ◆ Been found guilty;
  - ◆ Pled guilty to a lesser offense;
  - ◆ Been granted first offender treatment without adjudication of guilt;
  - ◆ Participated in a pre-trial diversion program;
  - ◆ Been found not guilty by reason of insanity; or
  - ◆ Been placed under a court order whereby an adjudication or sentence was withheld?
- 8. Have you ever been convicted, or pled to a lesser offense for any sexual offense?
- 9. Have you been convicted of a drug offense (felony or misdemeanor)?

I affirm that all information is true and correct. I hereby give permission to the Georgia Professional Standards Commission to obtain copies of any criminal and personnel records relating to me which are held by any local, state or federal government agency or private entity. I authorize any such agency or entity to release those records to the Commission.

**Applicant's Name:** \_\_\_\_\_  
*Please Print Last, First Middle*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**NOTE: Personal Affirmation questions (PAQs) are valid during the academic year (July 1 – June 30) of completion. Future PAQs should be completed in your MyPSC account.**

<b>Moral Turpitude</b>	
<p><b><u>Crimes involving moral turpitude:</u></b></p> <ul style="list-style-type: none"> <li>• Fraud or false pretenses in obtaining something of value</li> <li>• Larceny or a misdemeanor theft by taking</li> <li>• Larceny after trust</li> <li>• Murder</li> <li>• Soliciting for prostitutes</li> <li>• Voluntary manslaughter</li> <li>• Sale of narcotics or other illegal drugs</li> <li>• Pattern of failure to file federal tax returns</li> <li>• <u>Criminal Issuance</u> of a bad check</li> <li>• Making a false report of a crime</li> </ul>	<p><b><u>Crimes NOT involving moral turpitude:</u></b></p> <ul style="list-style-type: none"> <li>• Public drunkenness</li> <li>• Driving under the influence</li> <li>• Carrying a concealed weapon</li> <li>• Unlawful sale of liquor</li> <li>• Simple Battery and Simple Assault</li> <li>• Misdemeanor criminal trespass</li> <li>• Child abandonment</li> <li>• Misdemeanor offense of escape</li> <li>• Obstruction of a law enforcement officer (Misd.)</li> <li>• Most traffic offense</li> </ul>