

Teacher Certification  
Nebraska Department of Education  
nde.tcertweb@nebraska.gov  
www.education.ne.gov/tcert  
Phone: (402) 471-0739  
Fax: (402) 742-2359

# AGREEMENT STATEMENT

## For A Provisional Permit

This form must be submitted with a completed application

Teacher Certification  
301 Centennial Mall South  
P.O. Box 94987  
Lincoln, NE 68509-4987

NDE 20-002  
Revised 06-15

Printed Name of Applicant \_\_\_\_\_

Social Security Number\* \_\_\_\_\_

### Section A

#### PROVISIONAL NEBRASKA EDUCATOR PERMIT Employment is NOT required for the Provisional Teaching Certificate

**Provisional Teaching Certificate – Issued if Human Relations Training has been met and other requirements remain  
Valid for (2) Two Years**

A Provisional Teaching certificate may be issued to applicants who have received a baccalaureate degree and have completed an approved program for the preparation of teachers at a standard institution of higher education but have not met all of the additional requirements for a regular Nebraska teaching certificate. **The Provisional Teaching Permit Is NOT Renewable**

**In order to qualify for a regular teaching certificate, the applicant must complete these requirements:**

- ◆ Basic Skills Test;
- ◆ Content Test
- ◆ Special Education Training;
- ◆ Completion of approved recent college credit hours

**I VERIFY BY MY SIGNATURE THAT I HAVE NOT YET COMPLETED ALL OF THESE REQUIREMENTS FOR A REGULAR NEBRASKA TEACHING CERTIFICATE. I UNDERSTAND THAT I MUST COMPLETE THE REQUIREMENT(S) FOR SUBSEQUENT CERTIFICATION.**

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

### Section B

#### Advisement Confirmation for 15 HOUR RENEWAL

If 15 college credit hours are required to issue a Nebraska Educator certificate contact the certification officer at an approved teacher education institution to establish a plan of study for completion of the **specific 15 hours required**. This signature is required only for initial issuance. **Any substitutions to this program will require approval** from the teacher education institution.

(Name) \_\_\_\_\_ has been advised of the appropriate 15 semester hours of college credit required to issue a Nebraska Educator certificate.

Signature of Authorized College Certification Officer \_\_\_\_\_

Date \_\_\_\_\_

Institution \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

### Section C

#### PROVISIONAL ADMINISTRATIVE PERMIT (Not Renewable) PROVISIONAL SPECIAL SERVICES PERMIT Employment IS required for the Certificates Listed Above

**I AM REQUESTING THE FOLLOWING TYPE OF PERMIT:**     Provisional Administrative                       Provisional Special Services

**In order to qualify for a regular certificate, the applicant must complete these additional requirements:**

- ◆ Basic Skills Competency
- ◆ Content Test
- ◆ Special Education Training ,
- ◆ Completion of approved recent college credit hours
- ◆ Completion of an approved program

**I VERIFY BY MY SIGNATURE THAT I HAVE NOT YET COMPLETED ALL OF THESE REQUIREMENTS FOR A REGULAR NEBRASKA CERTIFICATE. I UNDERSTAND THAT I MUST COMPLETE THE REQUIREMENT(S) FOR SUBSEQUENT CERTIFICATION.**

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

#### To Be Completed By SUPERINTENDENT:

I, as Superintendent of the \_\_\_\_\_ Schools, do hereby affirm that this school system has employed the person named above for the 20\_\_\_\_ to 20\_\_\_\_ school year. I request the issuance of a provisional certificate to this applicant.

Signature of Superintendent \_\_\_\_\_ Date \_\_\_\_\_

\*The requirement that a certificate or permit applicant provide his/her social security number is contained in Neb. Rev. Stat. 79-810. The uses that will be made of this number are criminal background checks prior to issuance of a certificate and for purposes of data compilation and statistics concerning employment of graduates of state approved teacher education programs and employment of certificate or permit holders.