



# AFFIRMATION OF ELIGIBILITY

## PROVISIONAL SPECIAL EDUCATION ENDORSEMENT

This form must be submitted with a completed Application for a Nebraska Educator Certificate, the appropriate fee, and other required documents.

**EMPLOYMENT IS REQUIRED IN A NEBRASKA SCHOOL TO SUBMIT THIS FORM.**

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

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

### To be completed by the Superintendent:

I, as Superintendent of the \_\_\_\_\_ Schools, affirm that this school system has employed the person named above for the 20\_\_\_\_ to 20\_\_\_\_ school year and intend to assign him/her to a teaching position requiring a special education endorsement. I request the issuance of a **Provisional Special Education Endorsement**, which is valid for three years.

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

Date \_\_\_\_\_

### To be completed by Applicant:

I affirm by my signature that:

- I have completed at least six (6) semester hours in special education at a state approved teacher education institution (name of institution) \_\_\_\_\_. The title of the courses completed are \_\_\_\_\_ and is verified by the **attached** transcript.
- I have established an approved program at a state approved teacher education institution (name of institution) \_\_\_\_\_ that will lead to the following special education endorsement (name of endorsement) \_\_\_\_\_ at the \_\_\_\_\_ grade level.
- I have requested the Certification Officer at the approved teacher education institution to submit the appropriate form to the Nebraska Department of Education Teacher Certification Office, verifying the establishment of the approved program in special education.
- **I agree to complete at least nine (9) semester hours of approved coursework before the August 31st deadline for which this endorsement is valid. I understand that my Provisional Special Education Endorsement shall not be renewed if I fail to complete this requirement.**

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

Date \_\_\_\_\_

\*\*Signature must be the same as on the Application for a Nebraska Certificate form.

\*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.