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NDE 20-007 Revised 10-16

Courses Required for Completion of an Approved Teacher or Administrator Program (CRC)

Nebraska Permit Only Social Security Number* Name To the Applicant: If you are applying for the Provisional Teaching or Administrative Permit: Contact the college Certification Officer to complete this form AND Institutional Verification Form for the Provisional Administrative Permit, NDE 20-2016. To the Applicant: If you are applying for the Transitional Teaching Permit, contact the Certification Officer at an approved educator education preparation program. To the Certification Officer- Provisional Teaching or Administrative Permit: If the above named applicant has set up an approved program at your institution, complete this form AND the Institution Verification Form, NDE 20-2016. The approved area is _ at the __ To the Certification Officer- Transitional Teaching Permit: Complete the list of courses the applicant is required to complete for the Transitional Plan leading to the regular teaching certificate. The approved program area is __ at the __ Submit this form, the District Agreement Statement-NDE 20-001, a completed application form, appropriate application fee, official transcripts, fingerprint cards and fees, if required to the Nebraska Department of Education. **Course Number Title of Course Semester Hours Department** Signature of Authorized Certification Officer Date Institution Name and Address:

^{*}This requirement that a certificate or permit applicant provide his/her social security number is contained in Nebr. Rev. Stat. 79-810. The uses that will be made of this number are <u>criminal background check prior to issuance of a certificate and for purposes of data compilation concerning employment of graduates of state approved teacher education programs and employment of certificate permit holders.</u>