Page 1 of 3 APPLICATION FOR A NEBRASKA EDUCATOR CERTIFICATE OR PERMIT NDE20-003 Revised 01/2023 Educator Certification • Nebraska Department of Education • 500 South 84 th Street • P.O. Box 94987 Lincoln, NE 68509-4987• Phone: (402) 471-0739 • Fax: (402) 471-0117 • www.education.ne.gov/tcert • nde.tcertweb@nebraska.gov • Twitter: @nde_tcert					
PERSONAL INFORMATION					
Social Security Number*: Birth Date: M M – D D – Y Y Y Y					
Name:Last	First	Middle	Former Name(s)		
Address:Street or Box Number	City	State	Zip Code (9 Digit)		
Daytime Phone:() Home Phone:()					
Email Address:	Fax	Number:()			
Gender: Male Undeclared					
FIRST TIME APPLICANT (Mark one in each column below)					
OR Teaching Administrative Special Services		Alternative Nebraska I	Certificate with no deficiencies Alternative Program Permit Nebraska Entry Substitute Permit		
RENEWAL (Mark one in each column below)					
<u>OR</u>	Teaching Certificate with no deficiencies Administrative Special Services Substitute Permit		e Program Permit		
OTHER	(Mark c	ne below)			
Special Services Coaching Permit Postsecondary Permit Career Education Permit Duplicate (no charge) Added Endorsement Name Change (no charge)					
	ACADE	MIC RECORD			
List Colleges/Universities attended. Submit "Official Transcripts" of all college credit not currently on file at NDE. If additional space is needed, please use a separate piece of paper indicating colleges attended.					
College/University	Month/Year	Semester Hours Completed	Degree Earned		
	ENDC	DSEMENTS			
ENDORSEMENTS Areas completed for a teacher, administrator or special services program: (Example: Math 6-12)					
*The requirement that a certificate or permit applicant provide a social security number is contained in Neb. Rev. Stat. 79-810. The uses will be made of this number are criminal background checks prior to issuance of a certificate or permit and for purposes of data compilation and statistics concerning employment of graduates of					
state approved teacher education programs and employment of certificate and permit holders.					

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Name: _	Social Security Number*:
	FINGERPRINTING REQUIREMENT
√ CHE	ECK ONLY ONE
A.	□ I am exempt from the criminal record history check because I now hold, or at some time in the past did hold, a Nebraska educator
	certificate or permit. (If you checked this box proceed to Personal and Professional Fitness Section.)
В.	□ I have not held a Nebraska certificate or permit so I am submitting a record of my residences during the past five years on the Record
	of Residence Form in the forms section of the Applicant Manual or on a separate sheet of paper signed and dated. I have included the
	dates of residence (from month/year to month/year) with each address. Since the record demonstrates that I have been a continuous
	"resident" of Nebraska for five (5) or more years from the filing date of my application form with the Nebraska Department of Education,
	I am exempt from the criminal record history check.
	"Resident" shall mean an individual who has established a home where the individual is habitually present and to which having departed therefrom, intends to return. 92 NAC 21 S002.24
C.	□ I have not lived in Nebraska continuously for the five (5) years immediately prior to filing this application with the Nebraska
C.	Department of Education; therefore, I am submitting two (2) complete and legible sets of my fingerprints on two (2) fingerprint cards
	provided by the Nebraska Department of Education. I am also submitting the fingerprint processing fee in addition to any certification
	processing fee.
	PERSONAL AND PROFESSIONAL FITNESS
1.	Have you ever had a professional license, certificate, permit, credential, or other document authorizing the practice of a profession
	suspended, revoked, voided, denied, rejected, or voluntarily surrendered? Yes No
	If yes, attach a written statement that fully explains the facts and where this occurred.
2.	Are you currently the subject of any inquiry or investigation by any law enforcement agency, prosecutor's office, governmental body, or
	licensing agency? Yes No If yes, attach a written statement that fully explains the facts and where this is occurring.
3.	Is any action currently pending against you by any law enforcement agency, prosecutor's office, governmental body,
	or licensing agency? Yes No
	If yes, attach a written statement that fully explains the facts and where this is occurring.
4.	Have you ever been found guilty of a felony or misdemeanor or entered a plea of guilty or no contest to a felony or misdemeanor in any
	criminal, drug, or juvenile court? Minor traffic infractions and misdemeanor convictions for Driving Under the Influence or Minor in Possession of Alcohol need not be reported. Yes No
	If yes, complete Criminal Charges Self-Reporting Form. This form can be found on the supporting forms page of the Teacher
	Certification website at www.education.ne.gov/TCERT/
5.	Is an order or determination currently in effect by a court or any other governmental body which finds you to be any of the following: a
	mentally ill and dangerous person; mentally incompetent to stand trial; acquitted of criminal charges because of insanity; an
	incapacitated person in need of a guardian; or unable to manage your property due to mental illness, mental deficiency, chronic use of
	drugs or chronic intoxication? Yes No If yes, attach a copy of the order and a written statement that fully explains the facts and where this occurred.
6.	Are you currently an inpatient or resident in a mental health facility due to a determination by a qualified mental health
-	professional? Yes No
	If yes, please attach a written statement that fully explains the facts and where this is occurring.
7.	Are you a U.S. Citizen? Yes No
	DECLARATION, AUTHORIZATION AND SIGNATURE
I declare	that the information furnished herein is true, correct, and complete to the best of my knowledge. I hereby grant the permission and
authoriz	e the release of any information that would otherwise be confidential to the Nebraska Department of Education to verify all responses
	d herein, including but not limited to verification with any mental health facility, hospital or other facility that provides psychiatric or
	onal mental health services, including records from any commitment by any board of mental health or other agency authorized by law to
	ental health commitment, or governmental agency and records maintained by any criminal justice agency, including a criminal history information check, regarding any of my criminal charges or convictions, and to contact previous employers for information regarding the
	my employment. I hereby release, discharge, and exonerate the Nebraska Department of Education, its employees, and any person so
	ng information from any and all liability to every nature and kind arising out of the furnishing of such records and information. I understand
-	material submitted in connection with this application will become the property of the State of Nebraska, will be considered a public
	nd will not be returned. I further understand that application status information, including application denial and underlying reason for a
	lay be provided to personnel of any school district where I have applied for, being considered for employment or are currently employed
permit.	lerstand that inaccurate information submitted in support of an application shall be cause for denial or revocation of such certificate or
periin.	
Data	Signature of Applicant

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Name:	Social Security Number*:				
EXPERIENCE AS AN EDUCATION PROFESSIONAL DURING THE PAST FIVE YEARS Send copies of ALL out-of-state certificates					
School Years – From/To	School System Name and Location	Job Description			
	NON-REFUNDABLE FEES				
All School Certificate or Permit (valid in public and nonpublic schools) Nonpublic School Certificate or Permit (valid in nonpublic schools ONLY) Added Endorsement Added Endorsement plus Renewal for All School Certificate	\$75.00 All School Certificate or Permit plus in (valid in public and nonpublic school Sertificate or Performance or Permit plus in public school Certificate or Performance or Permit plus in public school Certificate or Permit plus in public and nonpublic school Certificate or Permit plus in public and nonpublic school Certificate or Permit plus in public and nonpublic school Certificate or Permit plus in public and nonpublic school Certificate or Permit plus in public and nonpublic school Certificate or Permit plus in public and nonpublic school Certificate or Permit plus in public and nonpublic school Certificate or Permit plus in public and nonpublic school Certificate or Permit plus in public and nonpublic school Certificate or Permit plus in public and nonpublic school Certificate or Permit plus in public school Certificate	nools) ermit plus \$105.00			
Added Endorsement plus Renewal for Nonpublic School	\$55.00 Duplicate or Name Change	NO CHARGE			
The Nebraska Department of Education prefers that applicants complete the application and pay all fees on-line. Payment on-line will expedite the application process.					
If a check or money order is mailed, please send to: NEBRASKA DEPARTMENT OF EDUCATION EDUCATOR CERTIFICATION P O BOX 94987 LINCOLN NE 68509-4987					
DISCLAIMER The Nebraska Teacher Certification Office does not communicate with applicants after receiving individual pieces of the required application materials; however, you may be contacted if all materials have not been received in a timely manner. It is the applicant's responsibility to check with educational agencies to guarantee that transcripts, institutional verifications, Praxis scores, agreement statements and other necessary materials have been sent to the Teacher Certification Office. It is the applicant's responsibility to submit two sets of legible fingerprint cards or complete the Record of Residence form. Any fingerprints submitted by an applicant will be used to check the criminal history records of the Federal Bureau of Investigations (FBI). Applicants wanting to obtain a change, correction, or updating of an FBI identification record may follow the procedures as set forth in 28 CFR 16.34. All Nebraska educational certified personnel in public or non-public schools must have a valid certificate or permit by September 1 st of the current school year. Failure to complete the process is not a valid reason for maintaining your employment after September 1 st .					
CANDIDATE APPLICATION STATUS					
Applicants can check the status of their application by logging on to their TEACH dashboard at https://teach.education.ne.gov.					
Please read and understand your application before submitting, as application fees are non-refundable.					