



# State of Rhode Island and Providence Plantations Department of Elementary and Secondary Education

## Educator Certification Career and Technical Education Preliminary Certificate and School Nurse Teacher Preliminary Certificate

### Ensure Educator Excellence:

Every student must have highly effective teachers.  
Every school must have highly effective leaders and support professionals.  
We must support educators throughout their careers.

### Educator Certification in Rhode Island

Educator certification is the process through which Rhode Island educators demonstrate that they are prepared to enter the profession as new educators and then continue to demonstrate currency and competency within their specific area(s) of certification. Educator certification is required for all educators in all Rhode Island public schools, state approved special education programs and state funded pre-kindergarten programs.

#### 1. Use of this application:

- This application should be used **ONLY** by individuals applying for or renewing a Career and Technical Education Teacher or School Nurse Teacher Preliminary Certificate.  
Note: This preliminary certificate is awarded to individuals who are not eligible for Full Rhode Island Certification in the areas of Career and Technical Education Teacher and School Nurse Teacher but have met specified criteria that qualify them to serve as educators while completing all full certification requirements
- Individuals who complete all requirements for Full Certification in the areas of Career and Technical Education Teacher and School Nurse Teacher should use the General Application for Certification in Rhode Island to apply for a Five Year Professional Certificate

#### 2. How to complete this application:

- Provide the required information in Sections A, B, and C. In section B, check the appropriate box(es) to indicate the Certification Request(s) and Certification Area(s). If you are seeking certification in Career and Technical Education, write in the specific Career and Technical Education area that you are requesting (e.g. Computer Programming, Health Occupations, and Quantity Foods).
  - **First Issuance/Renewal of a preliminary certificate:** Individual meets the Rhode Island certification requirements for a Preliminary Career and Technical Education Teacher or One Year School Nurse Teacher
  - **Reinstatement request:** To request reinstatement of an expired RI educator certification
- Calculate and provide the appropriate fees for certification areas identified in Section B. Note: Payment must be included with the application and all fees are calculated by certification area and per processing request and are non-refundable.
- Review the list of required documentation on Page 2 and submit all required documentation in the specified format with your application. Note: Incomplete applications will be returned.
- Mail the completed application, fees, and documentation to the address on page 7 of this application.

#### 3. When to apply for Certification:

- Individuals may request new certificates at any time. Individuals may renew their certificates after January 1 in the year of their certificate expiration (i.e. any time after 1/1/12 for a certificate expiring on 8/31/12).
- Application processing and evaluation varies based on demand and averages 12-16 weeks

#### 4. For more information consult the Office of Educator Quality and Certification website at:

<http://www.ride.ri.gov/Certification> or email [egac@ride.ri.gov](mailto:egac@ride.ri.gov).

## Certification Fees

All certification application fees are for processing requests and are non-refundable. Use the fee chart below to determine the appropriate fee for the request you submit. We are not able to accept cash. Make check payable to the *General Treasurer – State of Rhode Island*.

Type of Request	Fee
Career and Technical Education Teacher Preliminary or School Nurse Teacher Preliminary First Issuance and Renewal	\$100.00 for first certification area \$50.00 for each additional certification area

## Required Documentation

All required documentation must be submitted for your application to be processed. The required documentation is detailed in the chart below. Note: Transcripts that are already on file with the Rhode Island Department of Education do not need to be resubmitted with subsequent applications unless more current transcripts identify coursework and/or degrees not identified on the previously submitted transcripts.

Certification Area	Type/Conditions
Career and Technical Education	<ul style="list-style-type: none"> <li>Transcripts or High School Diploma (official or student issued) Note: If the transcript is provided as evidence of completion of a degree, the transcript must include a conferral date.</li> <li>Official Work Experience Verification form (p. 8 of this application) and supporting Wage and Tax Statement (W-2) for each employer submitted</li> <li>Occupational License/Certification (if required by a RI governing body)</li> </ul>
School Nurse Teacher	<ul style="list-style-type: none"> <li>Transcripts (official or student issued) Note: If the transcript is provided as evidence of completion of a degree, the transcript must include a conferral date.</li> <li>Certification Test Score Reports (original or photocopy)</li> <li>Official Work Experience Verification form (p. 8 of this application) OR</li> <li>Work experience verification (official employer letterhead)</li> <li>Registered Nurse license (original or photocopy)</li> </ul>

## Process to apply for a Career and Technical Educator Preliminary Certificate

Applying for the Career and Technical Educator Preliminary Certificate is a multi-step process. The application is reviewed by staff in both the Office of Educator Quality and Certification and the Office of Multiple Pathways.

Note: Additional steps are provided for further clarification.

<p>Steps:</p> <ol style="list-style-type: none"> <li>1. Applicant submits the completed Career and Technical Educator Preliminary application (application form, fee, transcripts or diploma, work experience form(s), Wage and Tax (W-2) statements and license, if applicable), to the Office of Educator Quality and Certification for processing</li> <li>2. The Office of Multiple Pathways reviews and verifies the applicant's work experience</li> <li>3. The East Providence School Department's NOCTI Coordinator schedules and administers, when applicable, a written and practical exam. Note: The exam fee is submitted directly to the East Providence NOCTI Coordinator</li> <li>4. The applicant is responsible to submit NOCTI assessment results to the Office of Certification</li> <li>5. The Office of Educator Quality and Certification reviews the application packet and issues the following:             <ol style="list-style-type: none"> <li>a. Career and Technical Educator Preliminary Certificate (If all issuance requirements are met)</li> <li>b. Status form detailing any additional requirements or evidence that must be provided for issuance or renewal of the CTE Preliminary Certificate</li> </ol> </li> </ol>
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### Issuance Requirements

The Career and Technical Education Teacher and School Nurse Teacher Preliminary Certificate are issued to individuals who meet the following requirements, but who do not yet meet the requirements for Full Certification in Rhode Island as a Career and Technical Educator or School Nurse Teacher. Attaining the preliminary certificate allows the individual to begin serving in Rhode Island schools while completing the requirements for Full Rhode Island certification.

Certification Area	Issuance Requirements
Career and Technical Education Teacher	<ul style="list-style-type: none"> <li>• Holds a high school diploma or high school equivalency diploma</li> <li>• Has five years of work experience in the specific career and technical area with Wage and Tax(W-2)statements</li> <li>• Passed a written and practical exam in the career and technical area when available (NOCTI). Note: This requirement may be waived for individuals holding an advanced license in the career and technical field. The exam is scheduled after the applicant submits the certification application.</li> <li>• Holds a valid occupational license/certificate in the specific career and technical area issued by the appropriate Rhode Island governing body (if applicable)</li> </ul>
School Nurse Teacher	<ul style="list-style-type: none"> <li>• Holds a Bachelor’s degree from a regionally accredited institution</li> <li>• Has completed an approved program for the preparation of professional nurses</li> <li>• Licensed as a professional nurse in Rhode Island</li> <li>• Provide evidence of three years experience as a professional nurse</li> </ul>



**Section B: Certification Information (See page 1 of this packet for more information)**

Section B-1 Secondary Career and Technical Education Teacher (11404)				
<b>Please check only ONE box:</b>			First Issuance	Renewal
Career and Technical Education Teacher Preliminary Certificate (\$100 for 1 <sup>st</sup> area, \$50 per additional certification area)			<input type="checkbox"/>	<input type="checkbox"/>
Certification Area(s): Identify each Certification Area requested (e.g. Computer Programming, Health Occupations, and Quantity Foods).				
\$100	\$50	\$50	\$50	\$50
\$50	\$50	\$50	\$50	\$50

Section B-2 All Grades School Nurse Teacher Certificate(11508)			
<b>Please check only ONE box:</b>		First Issuance	Renewal
All Grades School Nurse Teacher Preliminary Certificate		<input type="checkbox"/>	<input type="checkbox"/>

Section C Renewal Attestation(To be completed by the educator preparation provider)
The Renewal Attestation by the Preparation Program can be verified by submission of ONE of the following: <ul style="list-style-type: none"> <li>a. completion of section C-1 (below) or</li> <li>b. completed Entrance/Exit Assessment document from the approved credential review program of study or</li> <li>c. letter from an approved program stating the educator’s enrollment</li> </ul>

Section C-1	
I certify by my signature that:	
<input type="checkbox"/> The said candidate has begun a coursework of study to work towards full certification in RI.	
_____	_____
Candidate Name	Date
_____	_____
Name of Provider Representative (Please Print)	Signature of Provider Representative
_____	_____
Position, Organization	Email Address

**Section D: Required Information and Authorization**

Read the statements in the box below, provide answers to the following questions, and sign and date the authorization line attesting to the accuracy of the information in this application.

Teachers and other school personnel certified by the State of Rhode Island must be of good moral character. Rhode Island General Law 16-12-3 states that “Every teacher shall aim to implant and cultivate in the minds of all children committed to his care the principles of morality and virtue.” Your answers to the following questions regarding your employment, criminal, and certification history are important. Any criminal matter covered by a question must be disclosed regardless of how long ago it occurred or how unimportant it may seem. Criminal matters do not necessarily preclude certification, but the failure to answer a question truthfully may result in disqualification. Furthermore, Rhode Island General Law 11-18-1 prohibits the submission of a document containing a false and misleading statement to a public agency, and Rhode Island General Law 11-58-1 prohibits the use of a falsified educational record of a postsecondary institution.

Disclosure of the Social Security Number on page1 is mandatory. It will be furnished to the Rhode Island Division of Taxation pursuant to Chapter 76 of Title 5 of the Rhode Island General Laws, which states that any person applying for or renewing a license to conduct a profession within Rhode Island must have filed all required state tax returns and paid all taxes due the state. The statute also requires the following certification: “I hereby certify, under penalty of perjury, that I have filed all required state tax returns and have either paid all taxes due the state, entered into a written time payment agreement with the Rhode Island Division of Taxation, or am pursuing administrative or appellate review of unpaid taxes.”

<b>Legal Questions:</b>			
For each response of ‘YES’ you must attach a detailed explanation and specified documentation to your application. If you have previously submitted documentation for a specified question, you do not need to resubmit. Please indicate that the documentation was previously submitted in the margin next to the applicable question. Please note that there is a continuing duty to submit supplemental documentation relating to any events or circumstances requiring a “yes” response to the questions below.		Yes	No
1.	Have you ever been dismissed from any employment or have you ever resigned from any employment following the initiation of disciplinary action? If yes, attach an explanation.		
2.	Are you the subject of disciplinary action in your present employment? If yes, attach an explanation.		
3.	Have you ever been convicted of a felony or a misdemeanor? If yes, attach a copy of the conviction record(s). Expunged convictions must be disclosed under Rhode Island General Law 12-1.3-4 Attach an explanation stating the date, location and nature of the offense(s) involved in the expunged conviction(s).		
4.	Have you ever entered a plea of nolo contendere to a felony or misdemeanor charge? If yes, attach a copy of the conviction and/or probation record(s).		
5.	Are any felony or misdemeanor charges currently pending against you? If yes, attach an explanation.		
6.	Has your educator’s certificate or license in another state ever been suspended, revoked, or surrendered? If yes, attach an explanation.		
7.	Are you currently the subject of any action to revoke or suspend your educator’s certificate or license? If yes, attach an explanation.		

<b>OUT OF STATE CERTIFICATION</b>		YES	NO
Do you hold a valid educator certificate in any other state? (If yes, provide the following information)			
State:	Certification Area:	Certification Number:	

**AUTHORIZATION AND TAX CONFIRMATION:**

I certify the accuracy of the information provided in this application and in any supporting documentation that I may submit. I have included all supporting documentation. I have read and understand the notice regarding Rhode Island laws above. I hereby authorize the release of information to the Department of Education for the purpose of investigating or verifying any information in my application.

_____ (Signature of Applicant)	____/____/_____ (Date)
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Please mail only pages 4-8 of the application, fee and all required documents to:  
RHODE ISLAND DEPARTMENT OF EDUCATION  
OFFICE OF EDUCATOR QUALITY AND CERTIFICATION  
255 WESTMINSTER STREET, 4<sup>TH</sup> FLOOR  
PROVIDENCE, RI 02903-3400

CTE/SNT WORK EXPERIENCE FORM

The "Work Experience Form" is to be completed by you or your employer.

**Please use one form for each employer**

Your employment record will be reviewed by the State Test Coordinator. Each form must be completed in full and signed by a supervisor or company official. Please include this form with your application.

Note: A Work and Tax (W-2) statement must be submitted for each CTE Work Experience form completed.

PLEASE PRINT OR TYPE

NAME \_\_\_\_\_ SS# \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ TEL. # \_\_\_\_\_

Applying for Career and Technical Education Teacher Certification in the Occupational area of:

\_\_\_\_\_

NAME OF EMPLOYER \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/TOWN \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ TEL # \_\_\_\_\_

NAME OF SUPERVISOR \_\_\_\_\_

ENTRY DATE OF EMPLOYMENT \_\_\_\_\_ TERMINATION DATE \_\_\_\_\_

FULL TIME \_\_\_\_\_ PART TIME \_\_\_\_\_ Job title \_\_\_\_\_

DUTIES PERFORMED (SPECIFIC) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(If more space is needed, please use reverse side)

Signed by company official:

Name \_\_\_\_\_ Title \_\_\_\_\_

Telephone # \_\_\_\_\_ Date \_\_\_\_\_

The above information concerning my employment and training is correct and accurate to the best of my knowledge.

\_\_\_\_\_  
Candidate Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Work Experience reviewed for RI Dept. Ed. By

\_\_\_\_\_  
Date

THE RHODE ISLAND DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION RESERVES THE RIGHT TO VERIFY ALL INFORMATION PRESENTED ON THIS FORM.