

**State of Nevada
Department of Education
Application for Special Qualifications License**

For official use only:		
Receipt # _____	Fee _____	Receipt Date _____

Personal Information: SS _____ Date of Birth _____ Contact # _____				
Name _____				
Last	First	MI	Former Last Name	
Mailing Address _____				
Street	City	State	Zip	
Email Address _____				

Are you a United States Citizen? Yes No Place of Birth _____

If you are not a United States citizen, you must provide verification that a valid declaration to become a citizen or valid petition for naturalization has been filed with the United States Immigration Office or provide verification of being a lawful permanent resident of the United States as part of the application process.

Please identify subject areas (s) for which you are applying to teach:

a.	_____
b.	_____
c.	_____
d.	_____

***An applicant can apply for two (2) licenses areas or endorsements for the initial \$161.00 application fee. This fee is payable by cashier's check or money order only and is good for one year from date of receipt and is non-refundable. The fee for adding any additional endorsement is \$50.00 per endorsement.**

Please list your education / professional training from any post-secondary institution(s) from the most recently attended institution to the last ***You must supply at least one transcript reflecting a Master's degree or higher.*** **(NRS 394 prohibits the use or attempted use of false or misleading degrees and honorary degree in connection with any business, employment, occupation, profession, trade or public office. Any person who violates this provision is guilty of a misdemeanor.)**

From	To	Name of Institution	City/State	Major	Degree

Please include Forms TL.SQ.WE and TL.SQ.VExp with this application.

Restricted Personal Data

At the time of application, your fingerprints will be researched by local, state, and federal law enforcement agencies. Your licensure with the Nevada Department of Education is provisional pending receipt of your fingerprints. Sealed or expunged

records must be revealed. Your omission of any criminal history will result in revocation of your Nevada license. The following questions must be answered truthfully. Please check your answer.

Yes No

1. Have you ever been convicted of an offense other than a minor traffic violation?
2. Have you ever been arrested for a felony?
3. Have you ever been convicted of a felony?
4. Have you ever been arrested for a sex-related offense?
5. Have you ever been convicted of a sex-related offense?
6. Have you ever been arrested for a drug-related offense?
7. Have you ever been convicted of a drug-related offense?
8. Have you ever been arrested for an act of violence, including domestic violence?
9. Have you ever been convicted of an act of violence, including domestic violence?
10. Have you ever had your professional license revoked, suspended, restricted, or under review in any other state?
11. Have you ever been discharged or have you resigned pending action by any school district?
12. Have you ever been the subject of an investigation by any school district or any other employer?

If you answered **yes** to any of these questions, please submit a detailed explanation and court disposition documents.

OATH

I, _____, do solemnly swear (or affirm) that I will support, protect and defend the constitution and government of the United States, and the constitution and government of the State of Nevada against all enemies, whether domestic or foreign, and that I will bear true faith, allegiance and loyalty to the same, any ordinance, resolution or law of any state notwithstanding, and that I will well and faithfully perform all the duties of the office or position on which I am about to enter, (if an oath) so help me God. (if an affirmation) under the pains and penalties of perjury.

Falsification of this application and/or application material may result in suspension/revocation of your Nevada teaching license.

AFFIDAVIT

I certify, (declare) under penalty of perjury that the foregoing is true and correct:

Executed this _____ Day of _____ 20_____ In the City of _____

In the state of _____

Applicant Signature

NOTARIZED STATEMENT

Subscribed and sworn to before me at _____

on this _____ Day of _____ 20_____

Signature

Title

NOTE: All applicants are required to sign an affidavit before any one of the following: The Nevada Superintendent of Public Instruction, professional staff members of the Nevada Department of Education, any trustee of a Nevada county school board, superintendents or principals of Nevada schools, or a notary public. NRS 391.080.

The State of Nevada Department of Education is an Equal Opportunity / Affirmative Action Agency and does not discriminate on the basis of race, color, religion, sex, national origin, age, political affiliation or disability.

This application may be mailed to the appropriate office.

Northern Office
700 East Fifth Street
Suite 105
Carson City, NV 89701-5096
Phone: (775) 687-9115

Southern Office
9890 S Maryland Pkwy
Suite 231
Las Vegas, NV 89183
Phone: (702) 486-6458