



Tennessee Department of Education – Office of Educator Licensing

710 James Robertson Parkway - Andrew Johnson Tower, 12th Floor - Nashville, TN 37243

The information on this page must accompany any request for licensure transactions in the State of Tennessee. Please complete using black ink. Required items are identified with an asterisk (*). **The personal affirmation section must be completed.**

SECTION 1. CONTACT AND DEMOGRAPHIC INFORMATION

This section must be completed. Please be certain to provide accurate information.

First Name*	Middle Name*	Last Name*	(Maiden/Other Last Name)	
Date of Birth* (MM/DD/YYYY)	Street/P.O. Box*	City*	State*	Zip Code*
Primary Telephone Number* (999) 999-9999	Secondary Telephone Number (999) 999-9999		Social Security Number* 999-99-9999	
Primary Email Address*		Secondary Email Address		

The following information is collected for the purposes of federal reporting requirements. Please provide responses for ethnicity, race and gender.

- Ethnicity – Choose one ☐ Hispanic or Latino ☐ Not Hispanic or Latino
- Race – Mark all that apply ☐ American Indian or Alaska Native ☐ Asian
☐ Black or African American ☐ Native Hawaiian/Other Pacific Islander
☐ White
- Gender ☐ Male ☐ Female

SECTION 2. PERSONAL AFFIRMATION*

This section must be completed. False statements made in this application may constitute grounds to take action, revoke or deny a license. Check the appropriate response for each question. Do not include matters that the State Board of Education has previously investigated and found “No Probable Cause” to take any disciplinary action.

- ☐ Yes ☐ No 1. Have you been convicted of a felony, including conviction on a plea of guilty, a plea of *nolo contendere* or granting pre-trial diversion?
- ☐ Yes ☐ No 2. Have you ever been convicted of the illegal possession of drugs, including conviction on a plea of guilty, a plea of *nolo contendere* or an order granting pre-trial diversion?
- ☐ Yes ☐ No 3. Have you had a teacher’s certificate/license revoked, suspended or denied, or have you voluntarily relinquished a certificate/license. (Allowing a license to expire does not apply.)
- ☐ Yes ☐ No 4. Is there any action pending against your certification/license or application in another state?

- If you have answered “Yes” to question 1 or 2, please attach details of conviction, include date and location of conviction, and court certified copies of the judgment, conviction, and sentencing.
- If you have answered “Yes” to question 3 or 4, please attach details naming the state and/or issuing authority and explain the circumstances.

SECTION 3. SIGNATURE AND DATE

This section must be completed.

Applicant Signature

Date

SECTION 4. LICENSURE TRANSACTION REQUESTED

Please indicate the type(s) of licensure transaction(s) being requested. Mark all that apply.

☐ Initial Licensure ☐ Licensure Advancement ☐ Licensure Renewal ☐ Reactivating an Inactive License ☐ Waiver or Permit
☐ Additional Endorsement ☐ JROTC ☐ International Teacher Exchange License ☐
Other: _____

APPLICATION FOR PRACTITIONER SCHOOL SERVICES PERSONNEL LICENSE

Please note: ALL DOCUMENTS SUBMITTED TO THE OFFICE OF EDUCATOR LICENSING BECOME THE PROPERTY OF THE TENNESSEE DEPARTMENT OF EDUCATION AND WILL NOT BE RETURNED TO THE APPLICANT NOR WILL THE DEPARTMENT PROVIDE COPIES OF DOCUMENTS TO THE APPLICANT OR THIRD PARTIES. INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPROPRIATE ENTITY.

APPLICANT NAME _____

LICENSE NUMBER (if applicable) _____

Submit applications to: Office of Educator Licensing, Department of Education, 12th Floor Andrew Johnson Tower, Nashville, TN 37243**Step 1:** Indicate Endorsement(s) Requested (check all that apply):

_____ School Audiologist (PreK-12) _____ School Counselor (PreK-12) _____ School Psychologist (PreK-12)

_____ School Social Worker (PreK-12) _____ Speech/Language Pathologist (PreK-12)

Step 2: Indicate program completion status (check one):

_____ Completed Approved Preparation Program

_____ Currently Enrolled in Approved Preparation Program (School Counselor Endorsement ONLY)

Step 3: Obtain the appropriate signatures and include information below certifying completion of all requirements for a school services personnel preparation program approved for licensure in Tennessee or enrollment in an approved school counselor preparation program.

Note to recommending agency: By signing below, you are indicating that the above stated individual has completed an approved preparation program for school services personnel or is currently enrolled in a program approved in Tennessee for school counselors (SBE Rule 0520-02-03). In addition, you certify, to the best of your knowledge, that the individual is at least 18 years of age and possesses good moral character (Tenn. Code Ann. § 49-5-101).

Educator Preparation Provider_____
Program Completion Date_____
Dean of Education (Print name)_____
Dean of Education (Signature)_____
Date_____
Certification Officer (Print name)_____
Certification Officer (Signature)_____
Date_____
Email Address of Contact Person

Step 4: Provide verification of content knowledge by either submitting passing scores on required content assessments (See SBE Policy 5.105 for required assessments and passing scores) or confirmation of an undergraduate major in the endorsement content area. Please note, passing scores on required content assessments must be submitted prior to renewal or advancement of the Practitioner License.

Select the method by which content knowledge has been verified (check one):

Passing scores on required content assessments

☐

A Designated Institution Score Report has been submitted to the Office of Educator Licensing by my educator preparation provider.

☐

Scores have been sent from ETS to the Office of Educator Licensing (SSN must be provided to ETS).

or

Undergraduate major in content area

☐

Verification from educator preparation provider of an undergraduate major in an endorsement content area is provided below

Undergraduate Major_____
Signature of Authorized Official_____
Date**Step 5:** Submit official transcripts for all universities and colleges attended to the TN Office of Educator Licensing