## (For Privacy Act Notification see Application Instructions) Appeal: Mail application and payment Route to: (check or money order) to: Commission on Teacher Credentialing IHE/County/District Use Only Certification Division IRVINE UNIFIED SCHOOL DISTRICT 1900 Capitol Avenue Sacramento, California 95811-4213 IRVINE, GA. Commission Use Only: Fee Information Issuance APP Date: Email CTC Use Only Address. . 1. PERSONAL INFORMATION (type or print) Social Security or Individual Tax ID Number: Date of Birth: (mm/dd/yyyy) Applicant's Name: Sara Margaret Palmeri Former/Maiden Name(s): Sara Margaret Weber County or District of Employment: Orange Address: State: Zip: City: Message Phone: Home Phone: Work Phone: Email Address: I AM APPLYING FOR MY FIRST CALIFORNIA CREDENTIAL/PERMIT 2. CREDENTIAL TYPE (choose only one type below) OPTIONS: English Learner Authorizations Substitute Permits (PT) BILINGUAL AUTHORIZATION - Specify Language Single Subject (Secondary Teaching) Specify Subject (If you are requesting more than one subject, enter it in Services Credentials Term Specify World Language other than English (If applicable) Specify Other Health Services English Learner Authorization Term BILINGUAL AUTHORIZATION - Specify Language Child Development Permits (PK) School-Age Emphasis Multiple Subject (Elementary Teaching) Designated Subjects (PW) \_\_English Learner Authorization Term BILINGUAL AUTHORIZATION - Specify Language Subject(s) Term Education Specialist (Special Education) (If you are requesting more than one specialty area, enter it in Comments.) PROVISIONAL INTERNSHIP PERMIT (PP) Supplementary Authorization(s) (PJ) Specify Specialty Area MODERATE/SEVERE Subject Matter Authorization(s) (PJ) English Learner Authorization Term Other Specialist Credentials hga 1/14/15 R Added Authorizations (AASE)

APPLICATION FOR CREDENTIAL AUTHORIZING PUBLIC SCHOOL SERVICE

## 3. CHILD DEVELOPMENT PERMIT RENEWAL SELF-VERIFICATION

As the holder of a Child Development Permit (any level except the Associate Teacher Permit) you must complete a specific number of planned and approved professional growth activities for each five-year renewal. These activities must be recorded on the *Professional Growth Plan and Record* form. As the holder of a Child Development Permit choosing to self-verify completion of these requirements, you may be subject to an audit. The Commission reserves the right to request submission of these forms for auditing purposes any time within one year following submission of this application. If the Commission determines through its audit that you did not complete the professional growth requirements, your permit will not be renewed and you may be subject to adverse action on other credentials you currently hold. You must retain your *Professional Growth Plan and Record* form for one year following the submission of this application.

DECLARATION:	I have read the above and completed the following for this r	renewal of my clear credential:
I have completed	hours of professional growth activities	
My Professional Growth	Advisor isAdvisor's Name	Advisor's Phone Number
4. PROFESSIONAL FITE		

Answers to the following questions are required. If you answer yes to any question, you must complete the corresponding <u>Professional Fitness Explanation Form</u>.

Before granting your application, the Commission will review, at a minimum:

- Federal Bureau of Investigation criminal history (rap sheet)
- California Department of Justice criminal history (rap sheet)
- International database of teacher misconduct maintained by the National Association of State Directors of Teacher Education and Certification (NASDTEC)
- · Previous reviews by the Commission
- · Complaints from others
- Notifications from school districts
- Teacher preparation test score violations

You must disclose misconduct, even if:

- It happened a long time ago
- It happened in another state, federal court, military or jurisdiction outside the United States
- · You did not go to court and your attorney went for you
- You did not go to jail or the sentence was only a fine or probation
- You received a certificate of rehabilitation
- Your conviction was later dismissed (even if under Penal Code section 1203.4), expunged, set aside or the sentence was suspended

Warning: You will be required to sign your application under penalty of perjury; by doing so you are also stating:

- · That the information you provide is true and correct;
- That you understand any and all instructions related to your application;
- The Commission may reject your application if it is incomplete and it will be delayed;
- Failure to disclose any information requested is falsification of your application and the Commission may reject
  or deny your application or take disciplinary action against your credential



ē	a. Have you ever been:	
	<ul> <li>dismissed or,</li> </ul>	
	<ul> <li>non-reelected or,</li> </ul>	,
	<ul> <li>suspended without pay for more than ten days, or</li> </ul>	
	<ul> <li>retired or,</li> </ul>	
	<ul> <li>resigned from, or otherwise left school employment</li> </ul>	
	because of allegations of misconduct or while allegati	TAP 1941 LTT 944 727 V 1895 440
		FOX WITH WE TO TO TO TO THE BOOK TO THE
	Yes	No
t	b. Have you ever been convicted of any felony or misder	neanor in California or any other place?
	You must disclose:	
	<ul> <li>all criminal convictions</li> </ul>	
	<ul> <li>misdemeanors and felonies</li> </ul>	
	<ul> <li>convictions based on a plea of no contest or nolo con</li> </ul>	ntendere
	<ul> <li>convictions dismissed pursuant to Penal Code Section</li> </ul>	n 1203.4
	<ul> <li>driving under the influence (DUI) or reckless driving</li> </ul>	convictions
	<ul> <li>no matter how much time has passed</li> </ul>	
	You do not have to disclose:	0 04 1 (557 No. 0400 157 1500 1 0
	<ul> <li>misdemeanor marijuana-related convictions that occ convictions involving concentrated cannabis, which conviction.</li> </ul>	curred more than two years prior to this application, except must be disclosed regardless of the date of such a
	<ul> <li>infractions (DUI or reckless driving convictions are no</li> </ul>	ot_infractions)
	Yes	. No
c	c. Are you currently the subject of any inquiry or investi- in California or any other state?	gation by any law enforcement agency or any licensing agency
		□ u <sub>-</sub>
	Yes	No
d	d. Are any criminal charges currently pending against you	u?
	Produce desire as severe estar regionario est standario estado de constituir de consti	100
	□ v <sub>22</sub>	No
	Yes	L_I No
-	e Have you ever had any credential, including but not li	mited to, any Certificate of Clearance, permit, credential,
	license or other document authorizing public school se	ervice, revoked, denied, suspended, publicly reproved, and/or ncluding an action that was stayed) in California or any other
	Yes	□ No

	), —		ON THE STATE OF TH	
	Yes		No	
E CUII D ABUSE AND NE	GLECT MANDATED REPORTING	4.		
As a document holder as	uthorized to work with childre	n, it is part of my pro	ofessional and ethical du	ty to report every
instance of child abuse contact.	or neglect known or suspect	ed to have occurred	to a child with whom I	have professional
agency or a child protect	t report immediately, or as so tive agency, and will send a wi e of the abuse or neglect of the	ritten report and any o	sible, by telephone to a evidence relating to the	law enforcement incident within 36
supervisor, school princt	ting the information regardir ipal, school counselor, cowork nent agency or a child protective	er, or other person is	child abuse or neglect s not a substitute for m	to an employer, aking a mandated
I understand that the re reporting duties.	eporting duties are individual	and no supervisor or	administrator may imp	ede or inhibit my
I understand that once I	submit a report, I am not requ	ired to disclose my ide	entity to my employer.	
and Neglect Reporting A	ilure to report an instance of s ct under Section 11166 of the nousand dollars (\$1,000), or by	Penal Code is a misde	emeanor punishable by u	by the Child Abuse up to six months in
I acknowledge and certif	y that as a document holder, I	will fulfill all the duti	es required of a mandate	ed reporter.
✓ l agree				
Before submitting, plea	se review the application for	completeness:		
Type of credenti     All Professional     Read and agreed	ntion with correct SSN, date of ial clearly marked on page 1 (u Fitness Questions marked Yes o I to your responsibilities as a m or money order attached to th	se box below for addi: or No on pages 3 and 4 nandated reporter	tional subject/authoriza	
Checks or money orders not accept cash paymer	s may be made payable to the nts. All application fees are no	e Commission on Teac on-refundable.	ther Credentialing. The	Commission does
Applications submitted be returned.	that are incomplete or withou	at the appropriate fee	e included will not be pr	ocessed and will
6. OATH AND AFFIDAVIT	†			21.0
California, and the laws of	that I will support the Constitution the United States and the State of ifornia that all the foregoing state	California. I hereby cert	ify (or declare) under pena	of the State of Ity of perjury under
	Aliso Viejo		Orange	_ <sub>State</sub> <u>CA</u>

	edential, certificate, and permit types where serventials.  School District CDS Code	30736500129296
County CDS Code	School District CDS Code	-
Charter School/Non-Public School or Age	ency/Statewide Agency Name	
except 30-Day Substitute Teaching Permi	rmits, Short-Term Staff Permits, Limited Assignme its), must be filed through the employing agency. Jucators on file with the Commission prior to the	Employers must have an annual
Comments/Additional Subject Requests:		





State Of California Commission On Teacher Credentaling Certification Division 1900 Capitol Avenue Sacramento, CA 95811-4213

## VERIFICATION OF REQUIREMENTS For the Provisional Internship Permit

This form must be completed by the employing agency and submitted with each application for a Provisiona Internship Permit.
Name of Applicant Sara Palmeri
\$\$N
Name of Employing Agency Trvine Wufied School District
County/District/CDS Code30-73650
☐ Multiple Subject
☐ Single Subject - Specify subject(s):
Education Specialist - Specify specialty area(s): Moderate / Severe
By submitting this form, the employing agency named above verifies that items 1-6 have been completed.
<ol> <li>A diligent search has been conducted for a suitable credentialed teacher or qualified intern teacher by the following methods and verification of such recruitment efforts is attached:</li> </ol>
Required recruitment methods (provide photocopies of all of the following):  Distributed job announcements Contacted college or university placement centers Advertised on the Internet
Optional recruitment methods (in addition to the required methods above):  Advertised in professional journals  Attended job fairs in California  Attended recruitment out-of-state  Contacted California teacher recruitment centers  Advertised in local/national newspapers  Other (explain)
The permit holder will be provided orientation, guidance and assistance during the valid period of the permit
<ol> <li>Public notice of intent to employ the applicant in the identified position has been given and meets the following criteria (check the box that applies):</li> </ol>
Public School District Public notice was presented as an action item on the governing board agenda and acted upon favorably. A copy of the agenda item is attached.

The agenda item included the applicant's name, assignment, including subject(s) grade level(s), school site, and a statement that the applicant will be employed on the basis of a Provisional Internship Permit.
County Offices of Education, Nonpublic Schools, Statewide Agencies, and Charter Schools Public notice was posted at least 72 hours before the position was filled. A copy of the dated notice is attached.
Public notice included the applicant's name, assignment, including subject(s) grade level(s), school site, and a statement that the applicant will be employed on the basis of a Provisional Internship Permit.
Public notice included a signed statement from the superintendent or administrator confirming there were no objections to the issuance of the permit.
4. The permit holder will be provided assistance in developing a personalized plan through an agency-defined assessment that would lead to meeting subject matter competence related to the permit
<ol><li>The permit holder will be provided assistance to seek and enroll in subject matter training, such as workshops or seminars and site-based courses along with training in test-taking strategies and will assist the permit holder in meeting subject matter competence related to the permit</li></ol>
<ol> <li>The candidate has been apprised of the steps required to earn a credential and enroll in an intern program</li> </ol>
Applicant Signature     MP
Employing Agency Certification This form must be signed by the District/County Superintendent, Personnel Administrator, NPS/NPA Administrator, or Designee.
I certify under penalty of perjury that the information provided on this form is true and correct.
Signature K K
Title Human Resources Confidential
Date 1-30-2015