

CHARLOTTE COUNTY PUBLIC SCHOOLS  
1445 Education Way  
Port Charlotte, FL 33948

APPLICATION FOR CHARLOTTE COUNTY  
TEACHING CERTIFICATE

\$20.00 Fee -- To be paid at time of  
Drug Test & Fingerprinting

**Official use Only**

County Certification Fee Paid \_\_\_\_\_

Check No. \_\_\_\_\_

**Personal Information:**

Last 4 digits of SSN \_\_\_\_\_

Are you eligible to work in the U.S

Birthdate \_\_\_\_\_

Yes No (circle one)

Three Names may be shown on your certificate. Please fill in your complete name below and indicate by making checks the three names you wish to appear on your certificate.

\_\_\_\_\_

Last Name	Suffix	First Name	Middle Name	Former Name
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Address: \_\_\_\_\_

Street (Apt#)	City	State	Zip
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\_\_\_\_\_

Telephone number(s)

CERTIFICATE REQUESTED:

\_\_\_\_\_ Part-Time Non-Degreed Vocational \_\_\_\_\_  
Coverage

\_\_\_\_\_ Full-Time Non-Degreed Vocational \_\_\_\_\_  
Coverage

\_\_\_\_\_ Substitute Teacher (Five-Year Period) RENEWAL \_\_\_\_\_

\_\_\_\_\_ Part-Time/Full-Time Adult Education

APPROVAL:

\_\_\_\_\_  
Director of Human Resources Date

\_\_\_\_\_  
Certification Specialist/HR Technician Date

\_\_\_\_\_  
Director, Career and Technical Education Date

\_\_\_\_\_  
TYPE OF CERTIFICATE ISSUED

\_\_\_\_\_  
VALIDITY PERIOD

**ACADEMIC RECORD**

ACADEMIC RECORD		Graduation			Other Credits	
Name of College	State	Degree	Date	Major	Sem Hrs	Attend Dts

**TEACHING RECORD**

Dates of Employment	Name of School/County/Employer	State	Subject & Grade Level	Full-Time (F) Part-Time (P)	# Months Per Year	Public or Private School
Certificate Type	Validity Period	State	Subject	Grade Level	Subject	Grade Level

**VOCATIONAL INFORMATION - Complete only if applying for first time Vocational Certificate or Endorsement**

High School Diploma or GED? Yes _____ No _____	Name of High School	City	State	Year Graduated	
Work Experience/Job Title	Dates	Name of Employer		Full-Time (F) Part-Time (P)	How Long employed



CG-10 APPLICATION FOR A FLORIDA EDUCATOR'S CERTIFICATE

Florida Department of Education
Bureau of Educator Certification
Room 201, Turlington Building
325 West Gaines Street
Tallahassee, FL 32399-0400

PERSONAL INFORMATION

Complete in UPPERCASE letters using only black or blue ink.

Social Security Number

Grid for Social Security Number

First Name

Grid for First Name

Last Name

Grid for Last Name

LEGAL DISCLOSURE (Florida Law requires you to provide a YES or NO response)

After answering each of the following questions, you must sign the Affidavit to complete this section of your application. Please refer to the instructions in the Legal Disclosure Supplement on the reverse side of this page for additional information regarding this section of the application form.

SEALED OR EXPUNGED RECORDS (Report ONLY sealed or expunged records in this section)

For each of the following questions, if your answer is YES, please select YES. Otherwise, select NO.

- YES NO Have you ever had any record sealed or expunged in which you were convicted of a criminal offense?
YES NO Have you ever had any record sealed or expunged in which you were found guilty of a criminal offense?
YES NO Have you ever had any record sealed or expunged in which you had adjudication withheld on a criminal offense?
YES NO Have you ever had any record sealed or expunged in which you pled nolo contendere to a criminal offense?
YES NO Have you ever had any record sealed or expunged in which you pled guilty to a criminal offense?
YES NO Have you ever had any record sealed or expunged in which you entered into a pretrial diversion program or deferred prosecution program related to a criminal offense?
YES NO Do you have a petition pending to seal or expunge any criminal offense record?

SEALED or EXPUNGED records MUST BE REPORTED pursuant to ss. 943.0585 and 943.059, Florida Statutes. However, existence of such records WILL NOT BE DISCLOSED nor made part of your certification file which is public record.

CRIMINAL OFFENSE RECORD(S) (Report any record other than sealed or expunged in this section.)

For each of the following questions, if your answer is YES, please select YES. Otherwise, select NO.

- YES NO Have you ever been convicted of a criminal offense?
YES NO Have you ever been found guilty of a criminal offense?
YES NO Have you ever had adjudication withheld on a criminal offense?
YES NO Have you ever pled nolo contendere to a criminal offense?
YES NO Have you ever pled guilty to a criminal offense?
YES NO Have you ever entered into a pretrial diversion program or deferred prosecution program related to a criminal offense?
YES NO Are there currently charges pending against you for any criminal offense?

PROFESSIONAL LICENSE OR CERTIFICATE SANCTION(S)

For each of the following questions, if your answer is YES, please select YES. Otherwise, select NO.

- YES NO Have you ever had a professional license or certificate sanctioned or disciplined in this state or any other state?
YES NO Have you ever been DENIED a professional license or certificate in this state or any other state even if the certificate or license was later issued with conditions or limitations?
YES NO Have you ever had a professional license or certificate suspended or revoked in this state or any other state?
YES NO Have you ever surrendered, resigned, or relinquished a professional license or certificate in this state or any other state during or following an investigation into allegations of misconduct?
YES NO Have you ever had a professional license or professional certificate disciplined in this state or any other state by receiving a letter of reprimand, fine, probation or any other restriction or special conditions?
YES NO Do you have any current investigative action pending in this state or any other state against a professional license or certificate or against an application for a professional license or certificate?
YES NO Do you have any current disciplinary action pending in this state or any other state against a professional license or certificate or against an application for a professional license or certificate?

If you answered YES to any of the preceding questions, you must provide detailed complete information for each affirmative response in the Legal Disclosure Supplement on the reverse side of this page and submit it along with your application form.

**LEGAL DISCLOSURE SUPPLEMENT**

Florida Law requires you to provide a YES or NO answer to the questions within the Legal Disclosure section of your application, even if previously submitted. If you answered YES to any question in the Legal Disclosure section on the application form, you must provide detailed complete information for each affirmative response within the corresponding section in this Legal Disclosure Supplement.

You are not required to acknowledge minor traffic violations. The criminal offense of Driving Under the Influence (DUI) or Driving While Intoxicated (DWI) is **not** a minor traffic violation and should be disclosed on this form.

Having a criminal history or administrative sanction against a professional license does not automatically disqualify a person from receiving a Florida Educator's Certificate, but such incidents will prompt a review by the Office of Professional Practices Services.

A person is **ineligible for educator certification** if the person has been **convicted of a disqualifying offense** as listed in Section 1012.315 Florida Statutes. Please refer to [www.myfloridateacher.com](http://www.myfloridateacher.com) for more information.

First Name	Middle Name	Last Name	Former Name	Any Other Last Names / Aliases

**SEALED OR EXPUNGED RECORD(S)**

City Where Arrested	State	Date of Arrest	Charge	Plea	Disposition (outcome)

**CRIMINAL OFFENSE RECORD(S)**

City Where Arrested	State	Date of Arrest	Charge	Plea	Disposition (outcome)

**PROFESSIONAL LICENSE OR CERTIFICATE SANCTION(S)**

State: _____	Year: _____	License or Certificate: _____
Issuing Agency: _____	Sanction and Reason: _____	
State: _____	Year: _____	License or Certificate: _____
Issuing Agency: _____	Sanction and Reason: _____	
State: _____	Year: _____	License or Certificate: _____
Issuing Agency: _____	Sanction and Reason: _____	

**AFFIDAVIT**

I do hereby affirm by my signature that all information provided in this application section and supplement is true, accurate, and complete.

**WARNING: GIVING FALSE INFORMATION IN ORDER TO OBTAIN OR RENEW A FLORIDA EDUCATOR'S CERTIFICATE IS A CRIMINAL OFFENSE UNDER FLORIDA LAW. ANYONE GIVING FALSE INFORMATION ON THIS AFFIDAVIT IS SUBJECT TO CRIMINAL PROSECUTION, AS WELL AS DISCIPLINARY ACTION BY THE EDUCATION PRACTICES COMMISSION.**

\_\_\_\_\_  
 APPLICANT'S SIGNATURE \_\_\_\_\_ DATE