



STATE OF LOUISIANA
DEPARTMENT OF EDUCATION
POST OFFICE BOX 94064, BATON ROUGE, LOUISIANA 70804-9064
Toll Free #: 1-877-453-2721
<http://www.louisianaschools.net>

TEMPORARY EMPLOYMENT PERMIT

Eligibility Guidelines

A Temporary Employment Permit (TEP) is valid for one school year, renewable annually, and may be held a maximum of three years while the holder pursues satisfaction of state Praxis requirements. Upon completion of the three (3) years of employment on this certificate, for continued employment in a Louisiana school system, the holder must fulfill guidelines for a Level 1 or higher level certificate.

A TEP will be granted to those applicants who meet all requirements for a Level 1 certificate with the exception of A or B below:

- A. Passing one exam of the NTE/PRAXIS examination along with an appropriate aggregate score equal to or above the qualifying score on all the exams required for standard certification;

-OR-

- B. Passing all parts of the NTE Commons examination completed prior to February 20, 1985, with scores within 10% of the composite score required to qualify for standard certification.

TEP's qualifying under A. above will be issued at the request of applicants who meet all requirements for regular certification with the exception of one NTE/PRAXIS exam. When applying for a TEP, an individual must submit to Certification and Preparation all application materials required for issuance of a regular certificate.

To qualify for a TEP under B. above, a Louisiana employing authority must submit the request and verify that no regularly certified teacher is available for employment. Granting of this permit shall not waive the requirement that the person successfully complete the exam.

Application Process

The following items are required as part of a complete application packet:

1. **Application for Teaching Certificate or letter of recommendation** signed by a Louisiana college or university dean of education; verifying all components of the teacher preparation program was successfully completed by the applicant (e.g., courses, student teaching/internship, GPA) with the exception of NTE/Praxis ;
2. **TEP Application** form;
3. **Experience Verification Form signed by the Louisiana employing authority** (if applicable);
4. **Official transcripts** (copies not acceptable);
5. **Professional Conduct** form with all questions answered and completed form signed by the applicant;

“An Equal Opportunity Employer”

Revised 12/29/05

6. **PRAXIS/NTE Exam(s)** The exam score(s) may be submitted to the Division of Certification and Preparation directly from Educational Testing Services, or in the form of the original score report submitted directly from the applicant. The original score report will be returned to the applicant once a verified copy is on file in the teacher certification office.
7. **\$50.00 non-refundable certification fee** (check or money order, payable to the Louisiana Department of Education). The fee is required for the initial TEP only.

Temporary Employment Permit - Renewal Process

To renew a TEP for the subsequent school year, the applicant or Louisiana employing authority must submit the TEP Application Form, Professional Conduct Form and evidence to the State Department of Education that the PRAXIS exam has been retaken twice within one year from the date the permit was last issued.

Additional Information

- ◆ **Employment:** For employment opportunities one can contact the personnel directors at the state's 68 public school district(s) concerning employment opportunities. A Louisiana Teacher Certification and Recruitment website can be accessed at www.teachlouisiana.net .
- ◆ **Contact Information:** If there are questions about requirements or the certification process, one should contact the Division of Certification and Preparation at (225) 342-3490 (or toll free at 1-877-453-2721) or email Customerservice@la.gov for assistance.

**LOUISIANA DEPARTMENT OF EDUCATION
CERTIFICATION AND PREPARATION**

PLEASE TYPE OR PRINT IN INK

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|---|
| PROFESSIONAL CONDUCT FORM (All questions <u>must</u> be answered) |
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| | |
|--|--|
| NAME OF APPLICANT: (Including, First, Middle, and Married) | Social Security Number: _____ - _____ - _____ |
| ADDRESS: | DATE OF BIRTH: |

| <i>Each Question must be answered:</i> | Please Check | |
|--|--------------|----|
| | YES | NO |
| 1. Have you ever had any professional license/certificate denied, suspended, revoked, or voluntarily surrendered? If YES , in what state? _____ | | |
| 2. Are you currently being reviewed or investigated for purposes of such action as stated in #1 or is such action pending? If YES , in what state? _____ | | |
| 3. Have you ever been convicted of any felony offense, been found guilty or entered a plea of <i>nolo contendere</i> (no contest), even if adjudication was withheld? If yes, please provide the following information: Specify the Offense: _____ Date of Offense: _____ State and Parish/County of Conviction: _____ Judicial District of Court of Conviction: _____ | | |
| 4. Have you ever been convicted of a misdemeanor offense that involves any of the following: a. Sexual or physical abuse of a minor child or other illegal conduct with a minor child. b. The possession, use, or distribution of any illegal drug as defined by Louisiana or federal law. | | |
| 5. Have you ever been granted a pardon or expungement for any offense as stated in #3 or #4? | | |

If you answered "YES" to any questions, #1 through #5, you must provide court certified copies of all documents and proceedings, civil records of Federal, State and/or District School Board actions, or other relevant documents that provide full disclosure of the nature and circumstances of EACH separate incident in your application packet.

I affirm and declare that all information given by me in the responses to items #1 through #5 above is true, and correct, and complete to the best of my knowledge. I understand that any misrepresentation of facts, by omission or addition, may result in criminal prosecution and/or the denial or revocation of my teacher certificate.

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| SIGNATURE OF APPLICANT: | DATE: |
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