

Important Reminder:

The MTLE tests are <u>no longer</u> required for licensure!







Tier 3

- You have completed a licensure program, and
- You have a Bachelor's Degree
- Requires BSU Recommendation See future slides for process





Tier 4

- You have completed a licensure program, and
- You have 3 years of teaching experience
- Requires BSU Recommendation See future slides for process.
- You do not need to wait for your degree to post





Initial Tier 4 applicants: Must have 3 years of teaching experience.

Usually, candidates who qualify for a Tier 4 license are FasTrack and/or SPED candidates... Or candidates who are adding a field to their existing Tier 4 license.

PELSB	Approved Fingerpr	int Card			
APPLICANT ' See Privacy Act Notice on Back FD-258 (REV.12.10-07)		INFORMATION ST NAME ary	IN BLACK MIDDLE NAME Sue	FBI	LEAVE BLANK
SIGNATURE OF PERSON FINGERPRINTED Mary, Jones	Mary Sue Smith	MN9201 PELSB	30Z		
1234 Street Name	Mary Smith Jones	Saint Pa	ul, MN		Month Day Year 04/14/1999
Town Name, MN 56601 Date SIGNATURE OF OFFICIAL TAKING FINGERPRINTS	CITIZENSHIP CTZ US	F W	нст. 504 145	BLU BRO	PLACE OF BIRTH POB
3/10/2022 John Doe	YOUR NO. OCA		LE	EAVE BLANK	
Professional Educator Licensing & Standards Board 1021 Bandana Blvd. E., Suite 222 St. Paul, MN 55108-5111	FBINO. FBI ARMED FORCES NO. MNU	CLASS			
Minnesota Teacher License Section 122 A. 18, Subd. 8 MN Statute	123-45-6789 MISCELLANEOUS NO. MNU	REF			
	eard from PELSB by ay "Fingerprint Card elsb@state.mn.us				C.
If you are	for INITIAL LICENSURE already licensed, you do ete the fingerprint card.		4	100	Ω

Here are two things you can do now:

- 1. Contact PELSB and ask for a fingerprint card. You must use the PELSB fingerprint card.
- 2. Schedule an appointment to be fingerprinted (i.e.: Local Law Enforcement). Appointments are usually required and there is a fee (approximately \$20-25).
- 3. Do **NOT** complete this form prior to being fingerprinted. Some locations will enter your information into their computer and print it on the card.
- 4. <u>DO</u> use black ink when completing this form (if the fingerprinting location doesn't fill it in for you).
- 5. <u>DO</u> make sure to fill out the form completely, including your signature and that of the official who took your fingerprints.

Tips from PELSB:

- Fill out the card with a black ink pen
- Provide your full name and include any aliases or previous names
- Enter PELSB's ORI code: MN920130Z (if not already there)
- Enter your full date of birth, example 03/10/1999
- Citizenship = Country name (i.e.: US if you are a United States Citizen)
- When mailing your envelope to PELSB make sure to mark it "Do NOT Bend".
- Good for 1 year from date of fingerprinting.

Two Ways to Apply: Online or Paper Application

Initial Licensure ONLY

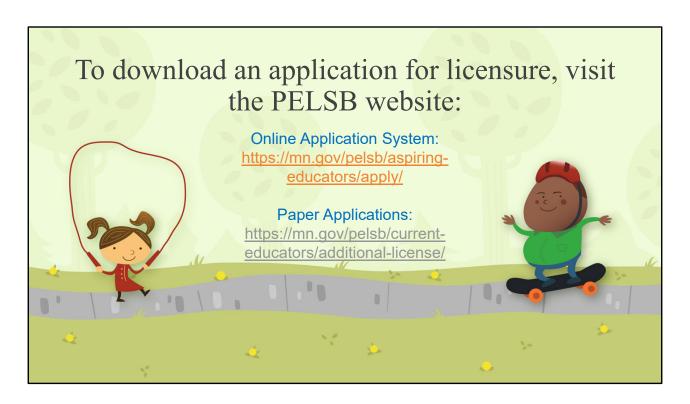
- You may complete the online application form.
- You will still need to send in a few pieces by mail (including the fingerprint card).
- The online application will provide you with a checklist of materials to send to PELSB via snail mail.

Existing License Holders

- You will need to complete the paper application and send everything to PELSB in one packet via snail mail.
- Existing license holders do <u>not</u> need to be fingerprinted.







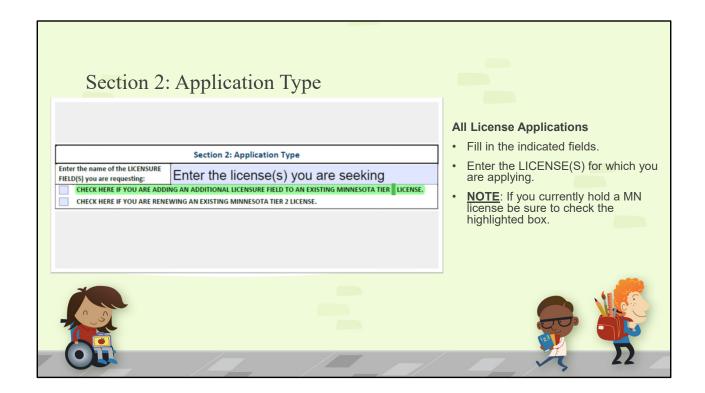
Paper Application and Online Application System:

Online System - ONLY <u>initial</u> licensure candidates can use the online system. All others (even if you hold sub license) must use the paper application.

Those who use the online system will still need to mail some materials to PELSB. The system will tell you what those are (most likely fingerprint card, Section 6 and transcripts). Send all these to PELSB in one packet.

Online system Tips & Tricks on slide 24.

Section 1: Applicant Information All License Applications Fill in the indicated fields. Section 1: Applicant Information You only have a "Minnesota File Folder Number" if you are already licensed. MINNESOTA FILE Enter your MN File Folde FOLDER NUMBER Number, if applicable. **REGISTER NUMBER** (for state use only) (only if you have one) Last Name Easterling First Name If you don't have a school address, leave the "Designated Address" blank. Aspen Lynn Social Security Number/ITIN (required) ### - ## - #### Birthdate: mm/dd/yyyy ## / ## / #### Male Female From PELSB: Contact Email Address (PELSB co (###) ### - #### Add your personal email address **Designated Address:** Your designated address may be a residence, PO Box, or place of business. Please note that the address you designate on this form does not remain private after a license is issued. Information Designated Street Address: Becomes Public ZIP Code City ZIP Code Address: Remains Private Home Address: Your home address remains private Ethnicity/Race American Indian Asian Black Hawaiian/ Pacific Islands Hispanic/ Latino White if a designated address is supplied. If there is no designated address, the home address does not remain private after a license is issued.



Enter <u>all</u> licenses you are applying for. For example, if Elementary Education and PrePrimary, write <u>both</u> in Section 2.

If you are already licensed and are adding a field to an existing license, check the box on the green-highlighted line.

Section 3: Educational Background

	Section 3: Educa	ational B	ackgroun	d	
Use the following 0 – No Degre Degree Codes:	e 1 – Associate's Degree 4 – Master's Degree		chelor's Deg ecialist	gree 3 – 5 th Year/No 6 – Doctorate	on-degree Program
College or University	Located at (city and state)	Degree Code	Date of Degree	Degree Field	FOR STATE USE ONLY College Code
Bemidji State University	Bemidji, MN	*2 or 3*	2020	Major Name	
* 2 if you are graduating					
* 3 if you are licensure only,	FasTrack, SPED				

All License Applications

- · Fill in the indicated fields.
- If you are completing a Bachelor's degree, select Degree Code 2.
- If you are a FasTrack, SPED, or other add-on licensure candidate, select Degree Code 3.
- Degree Field = Your Major (Social Studies, Elementary, SPED ASD, etc.)



If you are a licensure only student, indicate Bemidji State University, "Degree Code" 3. Leave the "Date of Degree" empty.

You should also include information about your Bachelor's degree and indicate the school's name and use "Degree Code" 2.





Section 3: Educational Background- ONLINE APPLICATION

EDUCATION BACKGROUND					
School #Code	City	Country	Date Degree Awarded	Degree	Licensure Program
Bemidji Delite - Elem Online #999901	Bemidji, MN	United States	12/15/2021	Bachelor's	Yes

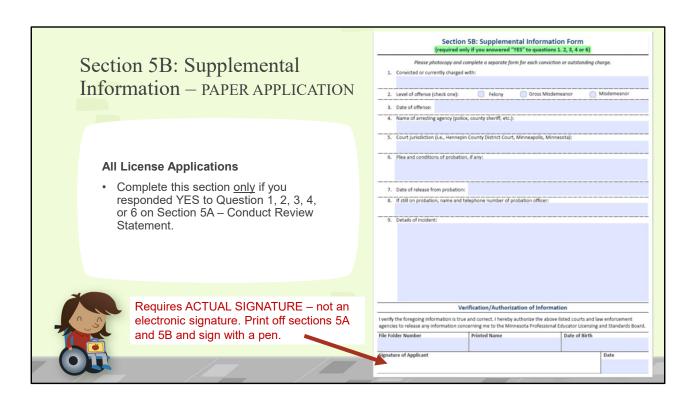
If you are completing the Online Application, do <u>NOT</u> select *Bemidji Delite – Elem Online #99901* as the School #Code. Instead, select *Bemidji State University* (even if you are a DLiTE completer)





		onduct Review Stateme or ALL applications)	ent		Δ	Il License Applications
Last Name Easterling File Folder Number	First Name Aspen	Middle Name Lynn Social Security Number/IT	Previous Name IN (required)		•	Fill in the indicated fields.
(only if you have Birthdate: mm/dd/yyyy ### / ### / #####	one)	#### - ### - #### FOR STATE USE ONLY	#		•	Respond to questions 1-12. Sign the bottom of Section 5A with
WARNING: FAILURE TO ANSWER ANY OF THE ABOVE QUESTIONS II INFORMATION REQUESTED COULD LEAD TO DENIAL OR DISCIPLINA LICENSE. Certification of Info				ON BEING TAKEN AGAINST ANY EDUCATOR	•	a pen. If you respond YES to any of the questions, complete the appropriate follow-up documentation identified
		oplication to release any infor		listed courts and law enforcement agencies Minnesota Professional Educator Licensing		on the form to be submitted with your application.
30	Signature of Appli	cant		Date		

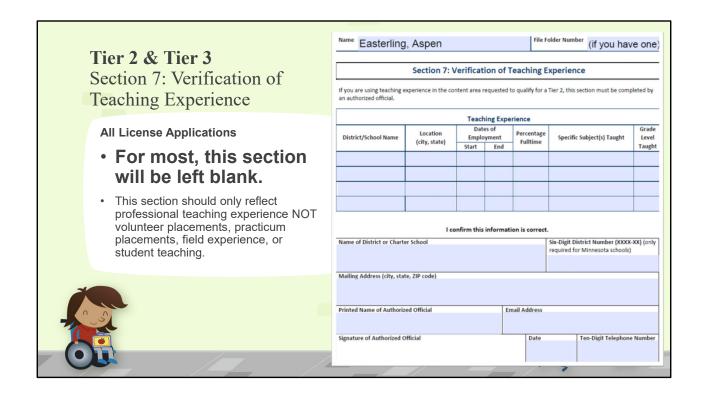
Online System does not have you sign Section 5A or 5B.



Online System does not have you sign Section 5A or 5B.

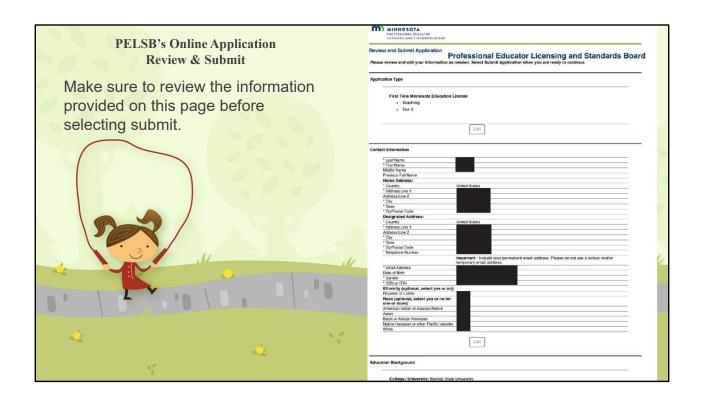
~ .	ection 6: Verification of ompletion of a State-Approved	Section 6: Verification of C		royed Licensu	re Progr	am		
	1	THIS SECTION IS TO BE COMPLETED B						
L	censure Program	The state-approved teacher preparation pro OUTSIDE of Minnesota AND (check all that a) a regionally accredited program an alternative preparation program	gram is from The state-approved		program is:			
	All License Applications	Stude	ent Teaching/Practicum/Interns	hip				
	Complete the Request Licensure	Complete this section for all applicants that experiences, include the ages/grade levels Al severe, and/or profound) of students served	ND specific disability categories (with t	he severity levels: n	nild, moderat			
	Documentation Form on BSU's website (see future slides).	K-12 School Name	Licensure Field(s) Taught	Grade Level(s) Taught	Start	es End		
	Attach Plan of Study to Request Form. This only applies to FasTrack, SPED, and DAPE.							
	The Cartification Officer will verify completion	Licensure Program Completed For special education licenses, please identify the specific disability category.						
	The Certification Officer will verify completion of requirements, complete Section 6, and return it to you with any additional documentation (transcripts, plans of study,	Subject/Licensure Field	Grade	Levels	Date Prep Program Co			
	test scores, etc.).		confirm this information is correct.					
~		Print Name of Certification Officer or Regist	rar	Title				
		Email Address for Certification Officer or Re	gistrar Telephone Nun	ber for Certification	Officer or R	egistrar		
NO.		Name of Institution	Location (city, stat	e, ZIP code)				
		Signature of Certification Officer or Registra	ur .		Date			

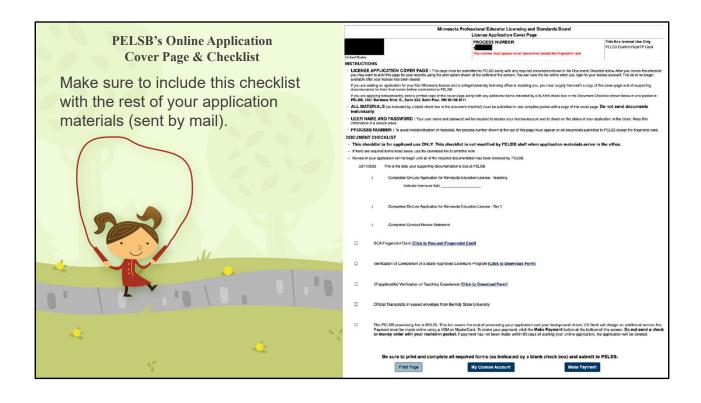
Plans of Study submitted must be signed by a faculty member! If you don't have a signed form, work with your advisor to secure one.

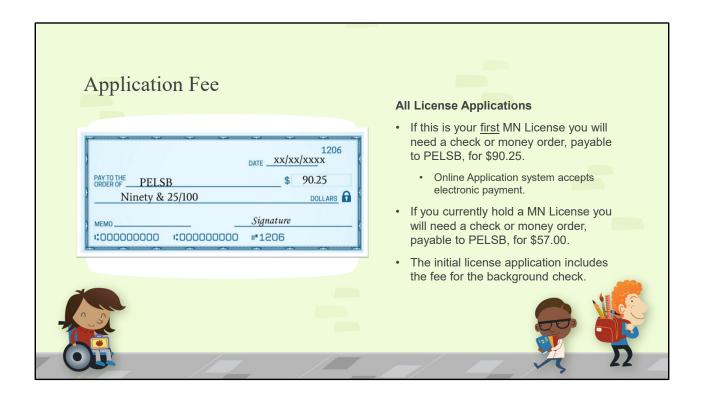


	Name Ea	sterling, Asp	en				File Fo	lder Number (if you ha	ve one)		
Tier 4	Section 7: Verification of Teaching Experience										
Section 7: Verification of Teaching Experience	All initial Tier 4 applicants are required to provide documentation of three years of teaching experience in a Minnesota school If you already hold a Tier 4 or five-year license, this form is not required. If you are applying for an initial Tier 4 license for a School Counselor, School Nurse, School Psychologist, School Social Worker, or Speech-Language Pathologist, you are required to provide evidence of three years of work experience in a Minnesota school										
All License Applications	Tier Held	Summative Evaluation	Impro	d on an vement an	Date Employ Start		Percentag Fulltime	e Specific Subject(s) Taught	Grade Level Taught		
Only needed if you are		Completed Not Completed		Yes No							
moving from a Tier 2 or		Completed Not Completed		Yes No							
Tier 3 to a Tier 4.		Completed Not Completed		Yes No							
This section should only reflect professional teaching experience NOT		Completed Not Completed		Yes No							
volunteer placements, practicum placements, field experience, or	I confirm this information is correct.										
student teaching.	Name of District or Charter School Six-Digit District Number (XXXX-XXI) (c required for Minnesota schools)										
		Mailing Address (city, state, ZIP code)					mail Address				
		Printed Name of Authorized Official				Title of	Title of Authorized Official				
			·								
	Signature of	Authorized Official					Date	Ten-Digit Telephone	Number		

This might apply to you if you are already licensed in Tier 2 or 3 and are moving to Tier 4.







The online application processes your payment immediately (pay by credit card).

The paper application must include a check or money order. PELSB's business services must process this payment and it can take 5-7 days.

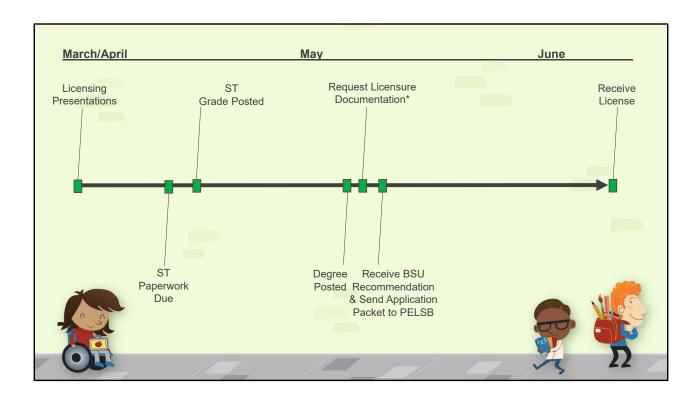
This is why we recommend you complete the online application – if you are able.



Once you receive an "Awarded on" date on your transcript, your degree has been awarded and you are a college graduate! If this section is missing (top left of transcript), your degree has not been awarded yet.

- Spring completers degrees are usually posted sometime in May*
- Fall completers degrees are usually posted sometime in January*

*These are approximate timelines. You must have completed all degree requirements and have an approved grad plan on file with the Records Office before your degree will post. If it seems to be taking overly long, please reach out to Teaching.License@bemidjistate.edu and I will follow up with Records.



Requesting a substitute license is $\underline{\mathsf{NOT}}$ encouraged, in fact PELSB discourages it – it may delay your actual license.

Request Licensure Documentation Form

STEP 1: If you already have a 4-year degree, you can apply when grades post.

If you do not have a 4-year degree, you need to wait for your degree to post.

STEP 2: Download the appropriate tiered application from the PELSB website (or complete the online application – initial licensure only).

STEP 3: Request a Section 6 in the online BSU "Request Licensure Documentation" form.

STEP 4: Once you receive the signed Section 6 from BSU (with the Certification Officer's signature) follow these steps:

• Print everything you receive from the BSU Certification Officer.

This includes:

- · The signed Section 6 Form
- All transcripts
- The plan of study (if included this only applies to FasTrack, SPED, and DAPE)
- *A copy of the email from the Certification Officer*

*PELSB will not accept your application materials without this additional documentation.

STEP 5: Send the completed application and all materials you receive in step 3 to PELSB in one-packet. Be sure to include the Checklist from the PELSB application.



PELSB will accept unofficial transcripts if they come from the Certification Officer. You must include a printed copy of the email from the Certification Officer.

DO NOT use staples, use paperclips!

DO send everything to PELSB in **one** packet.

I'm completing the paper application. What do I send to PELSB?

Refer to the checklist on page 1 of your application packet. Your packet should include:

- · Completed Sections 1-4
- · Completed Sections 5A and 5B with original signatures
- · Completed Section 6 with BSU Certification Officer signature
- Section 7 most likely blank
- · Copies of all transcripts the Certification Officer sends you
 - Include the approved plan of study, if you receive one (this only applies to FasTrack, SPED, and DAPE)
- · Copy of the email from the Certification Officer
- Completed fingerprint card (Initial Licenses Only)
- Payment
- · Any other documentation indicated on your application or by the Certification Officer

Mark the envelope "DO NOT BEND"

Make sure you send everything to PELSB in <u>ONE</u> packet.



The paper application includes a checklist – make sure you include everything on that list!

DO NOT use staples, use paperclips!

DO send everything to PELSB in **one** packet.

Online Application – See next slide!

I'm completing the ONLINE application. What do I send to PELSB?

Refer to the Document Checklist on your Online Application. This may include:

- · Completed Section 6 with BSU Certification Officer signature
- · Copies of all transcripts the Certification Officer sends you
 - Include the approved plan of study, if you receive one (this only applies to FasTrack, SPED, and DAPE)
- · Copy of the email from the Certification Officer
- · Completed fingerprint card
- · Any other documentation indicated on your application or by the Certification Officer

Mark the envelope "DO NOT BEND"

Make sure you send everything to PELSB in ONE packet.

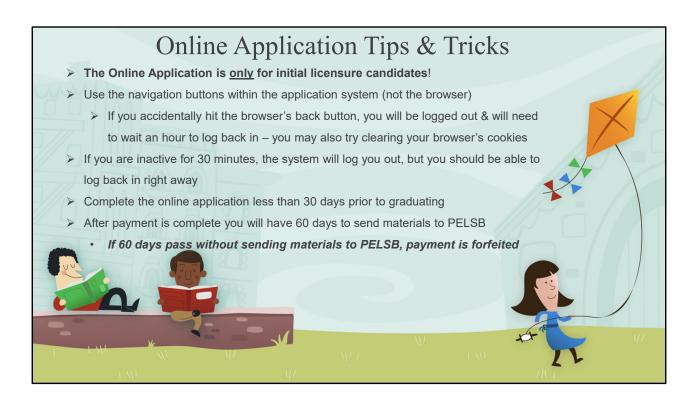




You will complete all sections, except for Section 6, in the online system. You will pay online.

The online application system will provide you with a list of additional materials (i.e.: fingerprint card, signed Section 6, transcripts, email from Certification Officer, etc.). You will need to MAIL these materials to PELSB in one packet.

DO NOT use staples, use paperclips!



You may want to wait until your degree posts before completing the online application to ensure it is completed less than 30 days prior to graduating.



Teacher Licensure Lookup:

MN Licensure system where you can enter your name or MN File Folder Number to monitor your PELSB application. The Historical Application Detail's status will change from 'Payment Received' to 'Issued'. If status changes to 'Additional Information Requested,' be sure to monitor your email for a message from PELSB.

