

GaPSC Certification Update Application

To be used for all certification transactions **<u>except</u>** initial Georgia certification.

200 Piedmont Avenue SW, Suite 1702, Atlanta, GA 30334-9032 Revised August 2016 - Please Use Black Ink or Type

This application may also be completed electronically through the Applications tab of your MyPSC account.

1. Please use ALL CAPS to print your LE	GAL NAME.							
Title Last Name								
□Mr. □Ms. □Dr.								
First Name	ne Middle Name							
Social Security Number or GaPSC Certification	on ID	Date of Birth (MM/DD/YY)						
Mailing Address								
City		State Zip	Code					
Primary Telephone		Alternate Te						
Email Address (required):			our spouse an active U.S. military					
Employment Status:		member?	Yes No					
I am currently employed as: a paraprofessional ^a a substitute (go to Section 3) a paraprofessional certificates must be processed by an employing LUA using a separate application. I am employed by a: GA public school GA private school GA public school GA private school								
I am employed by the following school/agency in Georgia:* *Please attach a completed Employer Assurance Form.								
2. Transaction(s) Requested: Check all th	nat apply.							
Renew my certificate*	Request a waiver [‡]	□ Request a waiver [‡] □ Convert to a different tier or						
Upgrade my certificate level*	Add a non-renewable	certificate field [‡]	Induction Pathway* (specify):					
Add a new renewable certificate field*								
Change my name to reflect a legal name change	Request a notarized of copy for submission to state's certification of	o another	Convert a Non-Renewable certificate to Renewable					
☐ Add a Supplemental Induction field [‡]	Request Retired Educ	+	te [‡] Convert a Certificate of Eligibility (requires verification of employment)					
I am requesting the following unlisted transaction:								
* Fee applies if not employed. [‡] Fee applies even if employed. [§] Separate fee applies for this single transaction, even if employed.								
Certificate Fields Requested (if applicable):								

Fee: <u>If a standard \$20 fee applies to your selected transaction(s)</u>, it must be paid online through your <u>MyPSC</u> account.

Please note: No more than \$20 will be required for one application, even if multiple transactions are requested, unless you are requesting a notarized certificate copy. Issuance of a notarized certificate copy requires a \$20 fee in addition to any fee owed for other transactions requested at the same time.

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Applicant's Name:				SSN or Cert ID:			
Ple	ase Print	Last,	First	Middle			
4.	All question an investig	ns must have a resp	onse in order for the attached explanati	e application proces on along with any a	'No" response to each of the following questions. as to continue. "YES" responses automatically open dditional supporting documentation. <u>DO NOT</u> <u>ating.</u>		
	Y N 1.	N 1. Have you ever had an adverse action (i.e. warning, reprimand, suspension, revocation, denial, vo surrender, disbarment) taken against a professional certificate, license or permit issued by an agency <u>G</u> <u>THAN the Georgia Professional Standards Commission</u> ?					
	Y N 2.				olation of a profession's laws, rules, standards or ssional Standards Commission?		
	(Y) (N) 3.	Have you ever receiv a copy of form DD21		able discharge from a	iny branch of the armed services? (If "yes", provide		
	Y N 4.	While under investig		ver left an employm	ent position (retired, resigned, been dismissed,		
	(Y) (N) 5.	Are you currently the	subject of an investig	gation involving sexua	I misconduct or physical harm to a child?		
	(Y) (N) 6.	Are you the subject of	of a pending investiga	tion involving a crimin	al act?		
	(Y) (N) 7.	 Pled guilty; Entered a plea of n Been found guilty; Pled guilty to a less Been granted first of Participated in a pro Been found not gui 	nolo contendere; ser offense; offender treatment wit e-trial diversion progr Ity by reason of insan	iity; or			
	(Y) (N) 8.	Have you ever been	convicted, or pled to	a lesser offense for ar	ny sexual offense?		
	(Y) (N) 9.	Have you been convi	icted of a drug offens	e (felony or misdemea	anor)?		

I affirm that all information is true and correct. I hereby give permission to the Georgia Professional Standards Commission to obtain copies of any criminal and personnel records relating to me which are held by any local, state or federal government agency or private entity. I authorize any such agency or entity to release those records to the Commission.

Moral Turnitudo

Signature: ___

• • Pattern of failure to file federal tax returns Criminal Issuance of a bad check

Making a false report of a crime

Date: _____

NOTE: This application must be received by the GaPSC within 90 days of the date of signature.

Crimes involving moral turpitude:	<u>(</u>	Crimes NOT involving moral turpitude:
• Fraud or false pretenses in obtaining something of value	•	Public drunkenness
 Larceny or a misdemeanor theft by taking 	•	Driving under the influence
Larceny after trust	•	Carrying a concealed weapon
• Murder	•	Unlawful sale of liquor
Soliciting for prostitutes	•	Simple Battery and Simple Assault
Voluntary manslaughter	•	Misdemeanor criminal trespass
Sale of narcotics or other illegal drugs	•	Child abandonment

- Child abandonment
 - Misdemeanor offense of escape
 - Obstruction of a law enforcement officer (Misd.)
 - Most traffic offenses