GENERAL APPLICATION FOR PENNSYLVANIA CERTIFICATE
FORM PDE 338 G
(Refer to instructions included with this two page form)

| APPLICANTS: Please note the following information in regard to your Social Security Number (SSN) |
| DATA REQUIRED BY THE FEDERAL PRIVACY ACT (5 U.S.C. Section 552a note) |
| AUTHORITY: 24 P.S. Section 1224. |
| PURPOSE(S): To be used for (1) registration and maintenance of records of all certificated persons as having met qualifications for teaching, (2) identification and collection of criminal/disciplinary records for certified educators and candidates for certification, and (3) provision of certification data to authorized personnel and agencies. |
| DISCLOSURE: Mandatory. Failure to disclose will prevent further processing of the application. |

SECTION I – PERSONAL INFORMATION (please print or type)

<table>
<thead>
<tr>
<th>1. Last Name</th>
<th>First Name</th>
<th>Middle Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Social Security Number</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Date of Birth (mm/dd/yyyy)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. □ Male □ Female</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Telephone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home/Cell (        )</td>
<td>Work Phone (        )</td>
<td></td>
</tr>
<tr>
<td>7. E-Mail Address</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Please list all former name(s) beginning with the most recent</td>
<td></td>
<td></td>
</tr>
<tr>
<td>__________________________________________________</td>
<td>______________</td>
<td>___________</td>
</tr>
<tr>
<td>Last                                                            First                                MI</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Are you a United States Citizen?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Yes □ No</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

SECTION II – CERTIFICATION INFORMATION

1. Date Initial Bachelor’s Degree conferred (Do not list Masters or Doctorate level degree-only Baccalaureate degree)

    Month/Year                                      Degree                                      College/University

2. Subject Area and 4-digit Code of the certification area for which you are applying (enter the area of concentration or endorsement, if applicable):

    Subject Area                              4-digit Code                              Concentration(s) / Endorsement

SECTION III – HEALTH CERTIFICATE

The Health Certificate section must be completed by a United States licensed physician, physician’s assistant or nurse practitioner

I certify that I am a physician, physician’s assistant or nurse practitioner (circle one) licensed/certified as such in a state of the United States or its capital; that I have examined the applicant and find that the applicant is not disqualified by reason of a mental or physical disability or a communicable disease from the successful performance of the essential functions of a teacher with or without a reasonable accommodation.

    Signature of Examiner                                      Title                                      Date

    State in which licensed                     State License No.                                      Daytime Phone Number

PDE 338 G (Revised 12/10)
## SECTION IV-BACKGROUND

Read and answer each question carefully... ensure that you have selected the appropriate check box. Incorrectly checking a box may significantly delay the processing of your application. Please refer to the instruction sheet for further information.

| 1. Have you ever been the subject of a child abuse investigation or report in this or any other state, territory or country? (If yes, read the instructions for this question first, then indicate whether the investigation or report is pending, unfounded, indicated, or founded by checking the appropriate box) | Yes: □ Pending □ Unfounded □ Indicated □ Founded □ No |
| 2. Are you currently the subject of any misconduct investigation by an employer? (If yes, refer to instructions) | □ Yes □ No |
| 3. Have you ever resigned from or otherwise left any employment (e.g., settlement agreement) while allegations of misconduct were pending, or under investigation? (If yes, refer to instructions) | □ Yes □ No |
| 4. Is there disciplinary action pending by a licensing agency in this or any other state, territory or country? (If yes, refer to instructions) | □ Yes □ No |
| 5. Have you ever had any certificate or license for any profession denied, revoked, suspended, surrendered, or received a public reprimand in this or any other state, territory or country? (If yes, refer to instructions) | □ Yes □ No |
| 6. Have you ever been convicted of a crime classified as a misdemeanor or felony in this state or any other state, territory or country? (If yes, refer to instructions.) (For purposes of this question, convicted includes pleas of nolo contendre and guilty pleas. However, summary offenses do not need to be acknowledged.) | □ Yes □ No |
| 7. Are criminal charges pending against you, or are you the subject of an inquiry or investigation by a law enforcement agency in this or any other state, territory or country? (If yes, refer to instructions) | □ Yes □ No |

## SECTION V-CODE OF CONDUCT

The Pennsylvania code of Professional Practice and Conduct for Educators, which may be found on the PDE website, sets forth the standards for professional practice for Pennsylvania professional educators. All professional educators are expected to conduct themselves in accordance with the Code. Failure to do so may result in professional discipline. Indicate that you have read the code by checking the box below.

□ I certify that I have read and will abide by the Code of Professional Practice and Conduct for Educators.

## SECTION VI-AFFIDAVIT

I certify that the information provided in this application, including all statements, transcripts and documentation, are correct and true. I understand that the falsification of any statement or document may result in professional discipline, including revocation of my Pennsylvania certificate.

Signature of Applicant __________________________ Date __________________________

PDE 338 G (Revised 7/10)
SECTION I: Personal Information

1. Print your Last Name, First Name, and Middle Initial
2. Print your Social Security Number
3. Print your complete Address and Zip Code
4. Print your Date of Birth
5. Check the appropriate box for male, or female
6. Print your telephone numbers in the event you must be contacted
7. Print your current e-mail address
8. Print your former names, if applicable
9. Please state your citizenship status by checking the “yes” or “no” box. If you are not a U.S citizen, you must enclose the following documents with your application:
   - A copy of the front and back of your permanent resident visa, which permits you to permanently reside and work in the United States.
   - A, Declaration of Intent to Become a Citizen of the United States form. This form is included in the Foreign Supplement Package available from the PDE website at: www.education.state.pa.us. This does not apply to Foreign Language teachers.
   - If you have become a citizen since submitting your last application, you must return your original Alien Provisional Certificate as well as a copy of your U.S. Naturalization Paper for conversion.

If the documentation noted above is not submitted with the PDE 338 G form, the application will be returned to you.

SECTION II: Certification Information

1. Enter the Month/Year, name of degree, and college from which you received your initial bachelor’s degree. Do not list information regarding Masters or Doctorate degrees.
2. List the Subject Area for which you are applying and specify the Code. Select a Subject Area and Code from the Subject Areas and Codes list.
3. If applicable, enter the area of concentration (mid-level certificates) or the endorsement (example: ESL)

SECTION III: Health Certificate

A U.S. licensed physician, physician’s assistant or nurse practitioner must sign the Health Certificate section of this application. The Health Certificate section is not required if the applicant holds, or has held, a PA certificate including Emergency Permits or Temporary Teaching Permits.

SECTION IV: Background

Please note: Incorrectly answering the any questions in Section IV may significantly delay the processing of your application.

1. If you have answered “pending”, “unfounded,” “founded” or “indicated” you must provide a current, original Child Abuse Clearance from the state, territory or country in which the investigation or report occurred, and a signed letter of explanation with your application. If you have never been the subject of a child abuse investigation or report, select the “no” box.
2. If you have answered “yes” a signed letter of explanation, as well as any public documentation pertaining to the disciplinary action must be submitted with this application.
3. If you have answered “yes” a signed letter of explanation, as well as any documentation pertaining to the disciplinary action, termination, investigation, or resignation, must be submitted with this application.
4. If you have answered “yes” a signed letter of explanation, as well as any public documentation pertaining to the disciplinary action must be submitted with this application.
5. If you have answered “yes” you will not be automatically prevented from obtaining a PA certificate. A certification denial based on insufficient credentials (such as lack of coursework or test scores) does not need to be acknowledged. Any documentation pertaining to the denial, revocation, suspension, surrender, or reprimand must be submitted with this application.

6. If you have answered “yes” please include the following in your application (A YES answer does not automatically prevent an applicant from obtaining a PA certificate):
   - a signed letter of explanation;
   - your resume;
   - certified court documents related to all criminal matters;
   - a current, original FBI Clearance or registration identification number;
   - a current, original PA Criminal Background Check;
   - a current, original PA Child Abuse Clearance;
   - a letter from your probation officer, if applicable; and
   - five letters of reference from individuals who have direct knowledge related to the conduct that led to the charges or conviction. If you are currently employed by a school district, letters of reference from the employer or supervisor are recommended.

7. If you have answered “yes” please attach the additional documentation as listed above.

SECTION V: Code of Conduct

The Pennsylvania’s Code of Professional Practice and Conduct for Educators may be found at http://www.portal.state.pa.us/portal/server.pt/community/guidelines%2C_policies%2C_complaint_forms%2C_reports_and_related_documents_/8850/code_of_conduct/529193. Review the code and check the box indicating that you have read and will abide by the Pennsylvania’s Code of Professional Practice and Conduct for Educators.

SECTION VI: Affidavit

Complete the Affidavit section by Signing and dating the application. Your signature certifies that all of the information provided in the application is correct and true. Misrepresentation/falsification may result in professional discipline and the revocation of your Pennsylvania certificate.

COMPLETING THE APPLICATION

The primary reason for delays in processing certification applications is missing or incomplete information on the 338 G form and/or missing documentation. If there is missing or incomplete information, and/or missing documentation, your application will not be processed and will be returned to you. All signatures and corresponding dates must be within one year of application submission.

Before mailing, review the application and ensure:

- The information entered on the 338 G form is complete and accurate (ensure that you have enclosed both pages of the 338 G form)
- A U.S. licensed physician, physician’s assistant or nurse practitioner has signed the form, if applicable
- All required documentation is enclosed
- The 338 G form has been signed and dated
- Enclose a U.S. Money Order for appropriate fee made payable to the Commonwealth of Pennsylvania with your application. The Bureau of School Leadership and Teacher Quality is unable to accept personal checks, cash, or credit cards. The non-refundable fee will be retained by the Commonwealth whether or not the transaction results in the issuance of a certificate.

Mail the General Application-Form PDE 338 G, U.S. money order, and supporting documents to:

Bureau of School Leadership and Teacher Quality
Pennsylvania Department of Education
333 Market Street, 3rd Floor
Harrisburg, PA 17126-0333

Please Note: If you are pursuing certification directly through a Pennsylvania teacher preparation program, the application should be submitted to the college/university. Please bring your completed application packet to the college/university—do not mail to PDE.
### Code | Instructional Areas - Miscellaneous
---|---
1200 | AGRICULTURE K-12
1405 | ART K-12
1603 | BUS/COMPUTER/INFO TECH K-12*
8825 | CITIZENSHIP EDUCATION 7-12*
3200 | COMMUNICATION 7-12
2361 | COOPERATIVE ED 7-12
2840 | EARLY CHILDHOOD N-3
2810 | ELEMENTARY K-6 ****
3230 | ENGLISH 7-12
4820 | ENVIRONMENTAL EDUCATION K-12
5600 | FAMILY/CONSUMER SCI K-12*
2825 | GRADES PK-4**** (not currently available)
3100 | GRADES 4-8**** (not currently available)
4810 | HEALTH K-12
4805 | HEALTH & PHYSICAL ED K-12
6240 | LIBRARY SCIENCE K-12
1666 | MARKETING/DISTR ED K-12
6800 | MATHEMATICS 7-12
2850 | MIDDLE LEVEL ENGLISH 7-9**
2860 | MIDDLE LEVEL MATHEMATICS 7-9**
2870 | MIDDLE LEVEL CITIZENSHIP EDUCATION 7-9**
2880 | MIDDLE LEVEL SCIENCE 7-9**
7205 | MUSIC K-12
7650 | READING SPECIALIST K-12
5215 | SAFETY ED/DRIVER ED 7-12
8865 | SOCIAL SCIENCES 7-12*
8875 | SOCIAL STUDIES 7-12
6075 | TECHNOLOGY EDUCATION K-12*

### Code | Instructional - Science
---|---
8405 | BIOLOGY 7-12
8420 | CHEMISTRY 7-12
8440 | EARTH AND SPACE SCIENCE 7-12
8450 | GENERAL SCIENCE 7-12
8470 | PHYSICS 7-12

### Code | Instructional - Special Education
---|---
9205 | HEARING IMPAIRED K-12
9265 | SPEECH & LANG IMPAIRED K-12
9290 | VISUALLY IMPAIRED K-12
9225 | SPECIAL EDUCATION N-12*, ****
9226 | SPECIAL EDUCATION PK-8*** (not currently available)
9227 | SPECIAL EDUCATION 7-12*** (not currently available)

### Code | Education Specialist Areas
---|---
1830 | DENTAL HYGIENIST K-12
1836 | ELEMENTARY SCHOOL COUNSELOR K-6
1850 | HOME AND SCHOOL VISITOR K-12
1825 | INSTRUCTIONAL TECHNOLOGY SPECIALIST K-12
1890 | SCHOOL NURSE K-12
1875 | SCHOOL PSYCHOLOGIST K-12
1837 | SECONDARY SCHOOL COUNSELOR 7-12

### Code | Supervisory Areas
---|---
1415 | ART SUPERVISOR
3215 | COMMUNICATION (ENGLISH) SUPERVISOR
2615 | COMPREHENSIVE VOCATIONAL ED SUPERVISOR
2515 | COOPERATIVE EDUCATION SUPERVISOR
2915 | CURRICULUM AND INSTRUCTION SUPERVISOR
2827 | EARLY CHILDHOOD SUPERVISOR
2815 | ELEMENTARY EDUCATION SUPERVISOR
4897 | ENVIRONMENTAL EDUCATION SUPERVISOR
4415 | FOREIGN LANGUAGES SUPERVISOR
4815 | HEALTH & PHYSICAL EDUCATION SUPERVISOR
5915 | INDUSTRIAL ARTS/TECHNOLOGY ED SUPERVISOR
1829 | INSTRUCTIONAL TECHNOLOGY SPEC SUPERVISOR
6415 | LIBRARY SCIENCE SUPERVISOR
6815 | MATHEMATICS SUPERVISOR
7215 | MUSICSUPERVISOR
7615 | READING SUPERVISOR
5227 | SAFETY ED/DRIVER EDUCATION SUPERVISOR
1815 | SCHOOL GUIDANCE SERVICES SUPERVISOR
1891 | SCHOOL HEALTH SERVICES SUPERVISOR
1877 | SCHOOL PSYCHOLOGICAL SERVICES SUPERVISOR
1855 | SCHOOL SOCIAL SERVICES SUPERVISOR
8415 | SCIENCE SUPERVISOR
8815 | SOCIAL STUDIES SUPERVISOR
9215 | SPECIAL EDUCATION SUPERVISOR

### Code | Administrative & Letter of Eligibility Areas
---|---
1115 | PRINCIPAL K-12
2300 | VOCATIONAL ADMINISTRATIVE DIRECTOR
1150 | DISTRICT SUPERINTENDENT
1155 | ASSISTANT DISTRICT SUPERINTENDENT
1160 | INTERMEDIATE UNIT EXECUTIVE DIRECTOR
1165 | ASSISTANT INTERMEDIATE UNIT EXECUTIVE DIRECTOR

* Effective September 1, 2001
** Effective September 1, 2003
*** Effective September 1, 2013
**** Discontinued January 1, 2013