



MONTEREY COUNTY OFFICE OF EDUCATION

Teacher Credentialing Program/Induction 2016-2017 Participating Teacher Referral Form Fax form to: 831-755-0367 – attn.: Susan Castillo



Please complete all parts of this form. Incomplete referrals will be returned and will delay determining Teacher's eligibility.

Name Last M.I. First (Maiden Name) Hire Date mm / dd / yyyy

District School Social Security Number - -

Date of Birth mm / dd / yyyy Cell/Home Phone

Ethnicity (optional - for CTC reporting purposes only) Check all that apply: White Hispanic/Latino Asian Black/African American American Indian/Alaska Native Native Hawaiian/Other Pacific Islander Declined to state

Residence Street City State Zip Code

Personal Email District (Work) Email

Job Placement Information:

- What have you been hired to teach? Be specific (e.g. grade level/content area) Does your teaching assignment match your credential authorization? Yes No

Credential Information: Please respond to all five questions below and ATTACH A COPY OF YOUR CREDENTIAL OR AFFIDAVIT.

1. Which type of credential(s) do you hold (or have held)? Multiple Subject Preliminary Clear Single Subject (subject) Preliminary Clear Education Specialist Preliminary Clear 2. Where did you receive your credential? College/University: 3. How many years have you taught with your CA Preliminary Credential year(s) (Do not include student teaching, substitute teaching, or internship.) 4. Teachers with previous teaching experience as a full-time teacher of record, rigorous and exemplary performance evaluations, recommendations from a personnel officer or principal, and current classroom observations may be eligible for an Early Completion Option. Could this apply to you? Yes No (See your Program Advisor for an application) 5. Have you already participated in an Induction/BTSA program? Yes No Year City/School District If YES, please scan and email your Transportability Document/ Transcript from your previous Induction/BTSA Program, to MCOE.