



APPLICATION FOR FIVE-YEAR RENEWABLE COACHING PERMIT

PART I: PERSONAL INFORMATION (Print all information in blue ink and in uppercase letters.)

Grid for LAST NAME

LAST NAME

Grid for FIRST NAME

FIRST NAME

MI

MI

GENDER (M/F)

GENDER (M/F)

Grid for SOCIAL SECURITY NUMBER

SOCIAL SECURITY NUMBER

Grid for BIRTH DATE

BIRTH DATE (Month-Day-Year) – Required

Grid for ADDRESS (Street)

ADDRESS (Street)

Grid for (Apt #)

(Apt #)

Grid for (City)

(City)

Grid for (State) and (Zip Code)

(State)

(Zip Code)

FORMER LAST NAME(S)

Grid for PHONE

PHONE

(Home/Cell)

Race/Ethnicity

Optional checkbox

(Optional)

- 1. Native American
2. Asian/Pacific Islander
3. Black
4. White
5. Hispanic

E-MAIL ADDRESS

- 1. Have you ever been convicted of any crime, excluding minor traffic violations? YES NO
2. Have you ever been dismissed for cause from any position? YES NO
3. Have you ever surrendered a professional certificate, license, permit or other credential (including, but not limited to, an education credential); had one revoked, suspended, annulled, invalidated, rejected or denied for cause; or been the subject of any other adverse or disciplinary credential action? YES NO

Pursuant to Connecticut General Statutes Section 10-221d, the State Board of Education must complete a criminal history records check on each applicant for an initial issuance or renewal of a certificate, authorization or permit. Each applicant seeking an initial issuance or renewal of a certificate, authorization or permit must also submit to a records check of the Department of Children and Families' child abuse and neglect registry established pursuant to Connecticut General Statutes Section 17a-101k. In addition, the State Board of Education is required to submit periodically for a criminal history records check the database of all persons who hold any certificate, authorization or permit.

NOTE: If you answer "YES" to any of the above questions, you must attach a signed statement of explanation. If there are multiple incidents within each question, you must list and explain each separately. Submit official copies of court or administrative record(s), including disposition of each case.

Information on this application is subject to disclosure pursuant to the Freedom of Information Act.



PART II: COMPLETION OF REQUIRED FIRST AID COURSE

The first aid course must have been completed within **3 years** prior to the date of application. Please sign your first aid card and attach: (1) a photocopy of both the front and back of the first aid card, or (2) original certificate of completion, to this application.

Name of course completed

Date of completion

PART III: COMPLETION OF REQUIRED CPR COURSE

Please sign your valid CPR card and attach: (1) a photocopy of both the front and back of the CPR card, or (2) original certificate of completion, to this application.

Name of course completed

Date of completion

PART IV: HIGH SCHOOL INFORMATION

Please attach a copy of your high school diploma or official high school transcript to this application.

PART V: CONCUSSION AND HEAD INJURY TRAINING REQUIREMENT

Attach the original certificate of completion of the concussion and head injury training requirement (Module 15) from the Connecticut Coaching Education Program (CCEP).

PART VI: COMPLETION OF REQUIRED COACHING COURSE

(For individuals NOT holding a valid Connecticut educator certificate, or a standard or permanent certificate)

Course completed at: _____ Date course completed: _____
(Name of college/university or board of education)

PART VII: RENEWAL OF FIVE-YEAR RENEWABLE COACHING PERMIT

Have you completed at least 15 clock hours of seminars, course work or workshops which provide information on safe and healthful coaching practices and understanding child and adolescent development as approved by the State Department of Education? YES NO

On or after July 1, 2010, through June 30, 2015, completion of the concussion and head injury training requirement (Module 15) from the Connecticut Coaching Education Program (CCEP).

After July 1, 2015, completion of the refresher course completed through the CCEP.

PART VIII: APPLICANT ATTESTATION

I certify that the information provided by me on this application and any accompanying documents contains no material misrepresentations, falsifications or omissions and that all of the information given by me is true, complete and accurate. I understand that all application and accompanying information may be verified and that any material misrepresentation, falsification or omission may result in the denial or revocation of my certificate(s), permit(s) or authorization(s). I further certify that I have attained the age of at least 18 years.

ORIGINAL SIGNATURE OF APPLICANT DATE:

Original Signature Must Be On Form Submitted



CONNECTICUT STATE DEPARTMENT OF EDUCATION
Bureau of Educator Standards and Certification
P.O. Box 150471 – Room 243
Hartford, CT 06115-0471

www.ct.gov/sde

**INSTRUCTIONS TO APPLICATION FOR
FIVE-YEAR RENEWABLE COACHING PERMIT**

Listed below are the required documents which must be submitted to the Bureau of Educator Standards and Certification to process your request for the issuance or renewal of a Five-Year Renewable Coaching Permit.

For the ISSUANCE of a Five-Year Renewable Coaching Permit you must complete and submit the following:

Applicant:

- 1. *If you do NOT hold a valid Connecticut educator certificate, or a standard or permanent certificate, please complete sections a through g of the instructions below.*
- 2. *If you hold a valid Connecticut educator certificate, or a standard or permanent certificate, please complete sections a, b, c, f and g of the instructions below.*

Instructions:

- a. Complete Parts I through VI and Part VIII of the application. (Applicants who hold a valid Connecticut educator certificate, or a standard or permanent certificate, need not complete Parts IV or VI).
- b. Attach a photocopy of your valid Standard First Aid card, or original certificate of completion. The Standard First Aid course must be completed within three years prior to the date of application. **Please remember to sign your Standard First Aid card prior to photocopying.**
- c. Attach a photocopy of your valid CPR card, or original certificate of completion. **Please remember to sign your CPR card prior to photocopying.**
- d. Attach a photocopy of your high school diploma or its equivalent. An official high school transcript may be submitted in lieu of a copy of your diploma.
- e. Official transcript/certificate verifying the completion of an approved coaching course.
- f. Attach the **original** certificate of completion of the concussion and head injury training requirement (Module 15) from the Connecticut Coaching Education Program (CCEP).
- g. Return completed application and attachments to the Bureau of Educator Standards and Certification.

(continued)

For the RENEWAL of a Five-Year Renewable Coaching Permit:

Instructions:

- a. Complete Parts I through III and Parts VII and VIII.
- b. Attach a photocopy of your Standard First Aid card, or original certificate of completion. The Standard First Aid course must be valid for the renewal date of the permit. **Please remember to sign your Standard First Aid card prior to photocopying.**
- c. Attach a photocopy of your CPR card, or original certificate of completion, valid for the renewal date of the permit after course. **Please remember to sign your CPR card prior to photocopying.**
- d. On or after July 1, 2010, through June 30, 2015, attach **original** certificate of completion of the concussion and head injury training requirement (Module 15) from the Connecticut Coaching Education Program (CCEP). After July 1, 2015, attach **official** verification of the refresher course completed through the CCEP.
- e. Return completed application and attachments to the Bureau of Educator Standards and Certification.

NOTE: Please do NOT submit verification of completion of the required 15 clock hours of seminars, course work or workshops for the renewal of the Five-Year Renewable Coaching Permit with this application. Applicants selected for a random audit will be notified in writing, and be required to submit verification.

Please submit the application for renewal no sooner than six months prior to the expiration date of your current permit.

<i>How to contact the Bureau of Educator Standards and Certification:</i>
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E-mail:	teacher.cert@ct.gov
Website:	www.ct.gov/sde
FAX:	860-713-7017
PHONE:	860-713-6969 24-hour Interactive Voice Response (IVR) for applicants. (To speak with a staff member, call the IVR weekdays, between 1-5 p.m.)