

**Nevada Department of Education
Educator Licensure Application Information**

For any educator license:

- Must be a citizen of the United States, or be a lawful permanent resident of the United States with a valid Permanent Resident Card, pursuant to [NRS 391.060](#). If you are a naturalized U.S. citizen, you must show either a U.S. passport or certificate of naturalization.
- Must meet all requirements for academic preparation, student teaching, and competency testing for the specific area(s) applied for. In some cases, full-time contracted teaching experience may waive the student teaching requirement (see [NAC 391.042](#)). If you previously held a teaching license in Nevada, **any provisions on that prior license must be cleared before a new license can be issued**, pursuant to [NAC 391.0565](#).

For an initial or substitute educator license:

Must submit:

- One completed original fingerprint card (FBI form FD-258). You may obtain fingerprint cards from any law enforcement agency or other agency that does fingerprinting.
- **Original** transcripts issued by an accredited college or university and bearing the college or university seal. Transcripts **do not** need to be in a sealed envelope. Electronic transcripts will be accepted only if they are transmitted directly to the Department of Education from an accredited college or university, or from a recognized clearinghouse such as eScript. Foreign transcripts **must** be accompanied by an **original** translation and course-by-course/degree equivalency evaluation completed by an approved evaluation service. A list of approved evaluation services is available on our website at http://www.doe.nv.gov/Educator_Licensure/Apply/.
- **Original** competency testing score reports (Praxis, CBEST, GRE, NTE, etc.).
- Copies of any **valid, non-expired** teaching credentials from other states.
- Verification of teaching experience or work experience, if applicable (see the requirements for your desired area of licensure). The Verification of Experience form may be downloaded from our [online forms page](#).
- A copy of your valid, non-expired state-issued driver's license or identification card, and/or proof of Permanent Resident status if not a U.S. citizen.
- A **cashier's check** or **money order** for \$161, payable to the Nevada Department of Education. **No other forms of payment will be accepted**. Licensing fees are **not** refundable.

For license renewal:

Must submit:

- One completed original fingerprint card (FBI form FD-258).
- Proof of completion of six credits of coursework completed during the period of validity of the current license (see [NAC 391.075](#)). This may be original college/university transcripts (electronic transcripts are acceptable if sent directly to the Department of Education from the issuing institution or a recognized clearinghouse such as eScript), PDE certificates/transcripts, or proof of professional development if applicable. Transcripts do not need to be in a sealed envelope.
- Proof of professional licensure or certification, if required for your area of licensure (e.g. school nurses, school psychologists, etc.).
- Proof of U.S. citizenship, **only if your citizenship status has changed** since your last license was issued.
- A **cashier's check** or **money order** for \$131, payable to the Nevada Department of Education. **No other forms of payment will be accepted**. Licensing fees are **not** refundable.

To add an additional endorsement:

Must submit:

- Proof of completion of all academic requirements for licensure in the specified area, in the form of **original** transcripts issued by an accredited college or university and bearing the college or university seal. Electronic transcripts are acceptable if sent directly to the Department of Education from the issuing institution or a recognized clearinghouse such as eScript. Transcripts do not need to be in a sealed envelope.
- Original competency testing score reports, if required.
- Verification of teaching experience or work experience, if applicable. The Verification of Experience form may be downloaded from [our online forms page](#).
- A **cashier's check** or **money order** for \$50 per requested endorsement, payable to the Nevada Department of Education. **No other forms of payment will be accepted**. Licensing fees are **not** refundable.

Las Vegas Office
 9890 South Maryland Parkway
 Suite 221
 Las Vegas, Nevada 89183
 702-486-6458



Carson City Office
 700 East Fifth Street
 Suite 105
 Carson City, Nevada 89701
 775-687-9115

www.teachers.nv.gov
license@doe.nv.gov

State of Nevada
Department of Education
Application for Educator Licensure
(Please Print Clearly)

APPLICATION TYPE:

Initial Fee of \$161.00 ARL (Provider: _____) Fee of \$161.00 Substitute Fee of \$161.00 Renewal Fee of \$131 Additional Endorsement/License Fee of \$50.00 per area

An applicant can apply for one (1) licensure area for the initial non-refundable application fee.

All fees are payable by cashier's check or money order only.

Name: _____
 Last First MI Maiden Name

License#: _____ SS#: _____ Date of Birth: _____

Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Phone Number: _____

Are you a U.S. Citizen: Yes No Place of Birth: _____

Do you currently hold a valid, unexpired educator license or certification in any other state? Yes No If yes, please submit a copy of each valid license you hold.

Please indicate which of the following licenses/endorsements you are applying for.

Any area marked with an asterisk (*) cannot be the only area of licensure on a Nevada educator license.

<input type="checkbox"/> Early Childhood (Birth-2nd Grade) Educator License	<input type="checkbox"/> Elementary (K-8) Educator License
Elementary (K-8) Additional Endorsement in: <input type="checkbox"/> Computers* <input type="checkbox"/> English* <input type="checkbox"/> Health* <input type="checkbox"/> Mathematics* <input type="checkbox"/> Literacy* <input type="checkbox"/> Science* <input type="checkbox"/> Social Studies* <input type="checkbox"/> Physical Education* <input type="checkbox"/> Bilingual Education*	
Middle School (7-9): <input type="checkbox"/> Art <input type="checkbox"/> English/Language Arts <input type="checkbox"/> Foreign Language (specify) _____ <input type="checkbox"/> Instrumental/Vocal Music <input type="checkbox"/> Instrumental Music <input type="checkbox"/> Mathematics <input type="checkbox"/> Science <input type="checkbox"/> Social Science <input type="checkbox"/> Vocal Music	
Secondary (7-12): <input type="checkbox"/> Anthropology <input type="checkbox"/> Art <input type="checkbox"/> Biological Science <input type="checkbox"/> Biology <input type="checkbox"/> Botany <input type="checkbox"/> Chemistry <input type="checkbox"/> Composition & Rhetoric <input type="checkbox"/> Computer Science <input type="checkbox"/> Dance <input type="checkbox"/> Dramatic or Theatrical Arts <input type="checkbox"/> Earth Science <input type="checkbox"/> Economics <input type="checkbox"/> English <input type="checkbox"/> English as a Second Language <input type="checkbox"/> English or American Literature <input type="checkbox"/> Environmental Science <input type="checkbox"/> Foreign Language (specify) _____ <input type="checkbox"/> General Science <input type="checkbox"/> Geography <input type="checkbox"/> Geology <input type="checkbox"/> Health Education <input type="checkbox"/> History of the U.S. & the World <input type="checkbox"/> Instrumental Music <input type="checkbox"/> Instrumental & Vocal Music <input type="checkbox"/> Journalism & Communication <input type="checkbox"/> Linguistics <input type="checkbox"/> Mathematics <input type="checkbox"/> Music <input type="checkbox"/> Physical Education <input type="checkbox"/> Physical Education & Health <input type="checkbox"/> Physical Science <input type="checkbox"/> Physics <input type="checkbox"/> Physiology <input type="checkbox"/> Political Science <input type="checkbox"/> Psychology <input type="checkbox"/> Reading <input type="checkbox"/> Recreational PE <input type="checkbox"/> Social Studies <input type="checkbox"/> Sociology <input type="checkbox"/> Speech <input type="checkbox"/> Speech & Drama <input type="checkbox"/> Vocal Music <input type="checkbox"/> Zoology	
Exceptional Pupils (Special Education): <input type="checkbox"/> Adapted PE <input type="checkbox"/> Alternative Education <input type="checkbox"/> Autism <input type="checkbox"/> Early Childhood Developmentally Delayed <input type="checkbox"/> Generalist <input type="checkbox"/> Gifted & Talented* <input type="checkbox"/> Hearing Impairments <input type="checkbox"/> Intellectual Disabilities <input type="checkbox"/> Orientation and Mobility <input type="checkbox"/> Speech & Language Impairments <input type="checkbox"/> Visual Impairments	
Licensed School Personnel (K-12): <input type="checkbox"/> Admin of Program* <input type="checkbox"/> Admin of School* <input type="checkbox"/> Reading Specialist* <input type="checkbox"/> School Counselor <input type="checkbox"/> School Library Media Specialist* <input type="checkbox"/> School Nurse <input type="checkbox"/> School Psychologist <input type="checkbox"/> School Social Worker <input type="checkbox"/> Staff Specialist <input type="checkbox"/> Supervisor of Curriculum & Instruction	
Special (K-12): <input type="checkbox"/> American Sign Language <input type="checkbox"/> Art <input type="checkbox"/> Audiological Services <input type="checkbox"/> Bilingual* <input type="checkbox"/> Computer Applications* <input type="checkbox"/> Computer Literacy* <input type="checkbox"/> Computer Programming* <input type="checkbox"/> Dance* <input type="checkbox"/> Drivers Ed (9-12)* <input type="checkbox"/> Foreign Language* _____ <input type="checkbox"/> Great Basin Language <input type="checkbox"/> Industrial Arts <input type="checkbox"/> JROTC <input type="checkbox"/> Music <input type="checkbox"/> Occupational Therapy <input type="checkbox"/> Physical Education <input type="checkbox"/> Physical Therapy <input type="checkbox"/> Reading* <input type="checkbox"/> TESL*	
Secondary Business & Industry or Career/Technical (specify area – see NAC 391.420 for available endorsements): _____	
Special Qualifications (specify area – see NAC 391.0583 for available endorsements): _____	

DEGREE INFORMATION

IMPORTANT: Original transcripts must be submitted with this application. Electronic transcripts (such as e-Script) are acceptable if they are sent directly to the Office of Educator Licensure (email to license@doe.nv.gov) from the issuing institution. Photocopies and faxes are not accepted. If you would like your transcripts returned to you, you must include a self-addressed, stamped envelope with your application. [NRS 394.700](#) prohibits the use or attempted use of false or misleading degrees and honorary degrees in connection with any business, employment, occupation, profession, trade or public office. Any person who violates this provision is guilty of a misdemeanor.

Please list any post-secondary institutions attended and degrees earned, starting with the most recently attended institution.

College/University	Major	Degree or # of Credits Earned	Date Conferred	Student Teaching	
				Credits/Year	Grade Level

NEVADA STATE PROFESSIONAL AND OCCUPATIONAL LICENSE

Pursuant to NRS [353C.1965](#), if you currently hold or have ever held a State of Nevada Professional or Occupational License, please complete the following:

Issuing Agency for the license: _____

Licensee Business Name: _____ License #: _____

Address on the license: _____ City: _____ State: _____ Zip: _____

HISTORY DISCLOSURE

- Yes No Have you ever had any professional certificate or license denied, revoked or suspended?
- Yes No Have you ever received a reprimand or other disciplinary action involving any professional certification or license?
- Yes No Have you ever been convicted of any felony or any offense involving moral turpitude?
- Yes No Have you ever been convicted of any offense other than a traffic citation?

If you answered "yes" to any of the above, you may be asked to provide court or disciplinary documents verifying the disposition of charges.

Date of incident(s): _____ Details (attach additional sheets if necessary): _____

FINGERPRINT BACKGROUND WAIVER

As an applicant who is the subject of a Federal Bureau of Investigation (FBI) fingerprint-based criminal history record check for a noncriminal justice purpose you have certain rights which are discussed below.

1. You must be notified by **Nevada Department of Education** that your fingerprints will be used to check the criminal history records of the FBI and the State of Nevada.
2. If you have a criminal history record, the officials making a determination of your suitability for the job, license or other benefit for which you are applying must provide you the opportunity to complete or challenge the accuracy of the information in the record. You may review and challenge the accuracy of any and all criminal history records which are returned to the submitting agency. The proper forms and procedures will be furnished to you by the Nevada Department of Public Safety, Records Bureau upon request. If you decide to challenge the accuracy or completeness of you FBI criminal history record, Title 28 of the Code of Federal Regulations Section 16.34 provides for the proper procedure to do so:

16.34 - Procedure to obtain change, correction or updating of identification records.

If, after reviewing his/her identification record, the subject thereof believes that it is incorrect or incomplete in any respect and wishes changes, corrections or updating of the alleged deficiency, he/she should make application directly to the agency which contributed the questioned information. The subject of a record may also direct his/her challenge as to the accuracy or completeness of any entry on his/her record to the FBI, Criminal Justice Information Services (CJIS) Division ATTN: SCU, Mod. D-2, 1000 Custer Hollow Road, Clarksburg, WV 26306. The FBI will then forward the challenge to the agency which submitted the data requesting that agency to verify or correct the challenged entry. Upon the receipt of an official communication directly from the agency which contributed the original information, the FBI CJIS Division will make any changes necessary in accordance with the information supplied by that agency.

3. Based on 28 CFR § 50.12 (b), officials making such determinations should not deny the license or employment based on information in the record until the applicant has been afforded a reasonable time to correct or complete the record or has declined to do so.
4. You have the right to expect that officials receiving the results of the fingerprint-based criminal history record check will use it only for authorized purposes and will not retain or disseminate it in violation of federal or state statute, regulation or executive order, or rule, procedure or standard established by the National Crime Prevention and Privacy Compact Council.
5. I hereby authorize **Nevada Department of Education** to submit a set of my fingerprints to the Nevada Department Public Safety, Records Bureau for the purpose of accessing and reviewing State of Nevada and FBI criminal history records that may pertain to me.
In giving this authorization, I expressly understand that the records may include information pertaining to notations of arrest, detentions, indictments, information or other charges for which the final court disposition is pending or is unknown to the above referenced agency. For records containing final court disposition information, I understand that the release may include information pertaining to dismissals, acquittals, convictions, sentences, correctional supervision information and information concerning the status of my parole or probation when applicable.
6. I hereby release from liability and promise to hold harmless under any and all causes of legal action, the State of Nevada, its officer(s), agent(s) and/or employee(s) who conducted my criminal history records search and provided information to the submitting agency for any statement(s), omission(s), or infringement(s) upon my current legal rights. I further release and promise to hold harmless and covenant not to sue any persons, firms, institutions or agencies providing such information to the State of Nevada on the basis of their disclosures. I have signed this release voluntarily and of my own free will.

A reproduction of this authorization for release of information by photocopy, facsimile or similar process, shall for all purposes be as valid as the original.

CHILD SUPPORT AFFIDAVIT

Professional or occupational licenses, certificates or permits will be denied or restricted if back child support is owed by the person holding the license. Pursuant to [NRS 391.034](#), the License for Educational Personnel issued by the Nevada Department of Education is subject to this requirement.

Please mark the appropriate response. (Failure to mark one of the three options will result in denial of the application.)

- I am not subject to a court order for the support of a child.
- I am subject to a court order for the support of one or more children and I am in compliance with the order or I am in compliance with a plan approved by the District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order;
- I am subject to a court order for the support of one or more children and I am not in compliance with the order or a plan approved by the District Attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

OATH OF OFFICE

Pursuant to [NRS 391.080](#), all applicants for licensure as an educator must subscribe to the Oath of Office as specified in the Nevada Constitution:

I, _____, do solemnly swear (or affirm) that I will support, protect and defend the constitution and government of the United States, and the constitution and government of the State of Nevada against all enemies, whether domestic or foreign, and that I will bear true faith, allegiance and loyalty to the same, any ordinance, resolution or law of any state notwithstanding, and that I will well and faithfully perform all the duties of the office or position on which I am about to enter, (if an oath) so help me God; (if an affirmation) under the pains and penalties of perjury.

In consideration for processing my application I, the undersigned, whose name and signature voluntarily appears below; do hereby and irrevocably agree to the above, including all provisions of the Fingerprint Background Waiver, the Child Support Affidavit, and the Oath of Office, and affirm that all information provided is true and correct to the best of my knowledge.

Applicant Signature Date

STOP! READ BELOW BEFORE SUBMITTING YOUR APPLICATION!

All Applicants - Did you:

- ✓ Complete **all pages** of your application?
- ✓ **Sign** your application?
- ✓ Include the following with your application?
 - Completed and signed fingerprint card (FBI form FD-258)
 - Original college or university transcripts (or PDE/CEU transcripts if renewing)
 - Self-addressed, stamped envelope (if you want transcripts returned to you)
 - Copies of any valid, unexpired teaching credentials you hold in other states
 - Verification of work or teaching experience, if applicable
 - Copies of any valid, unexpired professional licenses or certifications applicable to your area of licensure (e.g. school nurse, psychologist, etc.)
 - Cashier’s check or money order payable to the Nevada Department of Education (**no personal checks**)

Mail-In Applicants Only - Did you:

- ✓ Include a copy of your state-issued driver’s license or ID card with your application?
- ✓ Include a copy of your Permanent Resident Card with your application (if not a U.S. citizen)

Walk-In Applicants Only - Did you:

- ✓ Remember to bring your driver’s license or state issued ID card with you?
- ✓ Remember to bring your Permanent Resident Card with you (if not a U.S. citizen)?

OFFICE USE ONLY	
Processed by _____	Date_ _____