Please **do not** staple

NT

Non-tax Certificate Application

PERSONAL INFORMATION

SSN _____

–OR– Educator State ID ____ - _____

Birthdate _____ Male ☐ Female ☐

First Name _____ MI ____

Last Name _____

Address _____

_____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

E-mail _____

Other names that may appear on official documents (maiden, etc.)

_____

Ohio Department of Education

Office of Educator Licensure
25 S. Front St., Mail Stop 105
Columbus, Ohio 43215-4183

This application has 2 pages to be completed. **Please complete using black or blue ink only**.

Use this application for a:

Non-tax Certificate

☐ **New**

☐ **Correct effective year**

Amount enclosed: $ _____

BACKGROUND CHECKS

First Ohio License, Certificate or Permit

When an individual submits an application for his/her first license, certificate or permit issued by the Ohio Department of Education, a **BCI** and **FBI** background check report, completed within 365 days of the date the application is received, must be on file at the Department of Education.

Renewals and Additional Licenses, Certificates or Permits

Have you lived continuously in Ohio for the past 5 years? You must check one:

○ **YES**

An **FBI** background check is required if the report on file with ODE is more than 5 years old at the date the application is received. A **BCI** background check is required if you do not have one on file with ODE.

○ **NO**

Both the **BCI** and **FBI** background checks are required if the reports on file with ODE are more than five years old on the date the application is received.

Please note:

The Ohio Department of Education **is not able** to accept paper reports. All background check reports must be submitted to this office via *electronic* submission directly from the Ohio Bureau of Criminal Investigation. When you have your fingerprints taken at a WebCheck facility, please ask the person taking the prints to check the box under 'Reason Fingerprinted' to send to the Ohio Department of Education per the example below:

Reason Fingerprinted

X *Send to the Ohio Department of Education*

Please **do not** use the Department of Education address in the 'mail to' section because the department is not able to utilize paper reports.
For more information on how to complete this electronic process, please visit www.ohioattorneygeneral.gov/Services/Business/WebCheck.

LEGAL QUESTIONS (Each question MUST be answered by placing a ✔ in the appropriate box.)

If you answer **YES** to any question, attach an explanation to this application. Please include the **year of conviction**, the **nature of the offense** and the **court where the matter was heard**.

☐ Yes ☐ No Have you ever been convicted of, found guilty of, pled guilty to, or pled no contest to any misdemeanor other than a traffic offense?

☐ Yes ☐ No Have you ever been convicted of, found guilty of, pled guilty to, or pled no contest to any felony?

☐ Yes ☐ No Have you ever had a criminal conviction sealed or expunged?

☐ Yes ☐ No Have you ever had ANY professional certificate, license, permit, or an application for the same, revoked, suspended, limited or denied?

☐ Yes ☐ No Have you ever surrendered ANY certificate, license or permit, other than a driver's license?

APPLICANT SIGNATURE

Il certify under penalty of loss of my right to teach or work in the schools of Ohio that the answers to these five questions are true and correct in every respect.

_____ _____

Signature of Applicant Date

Use this application for a: **Non-Tax Certificate**

CERTIFICATE INFORMATION

☐ **Non-tax Certificate $200**

Please choose **one** option below.

☐ **Bachelor's degree (Option A)**
Valid for teaching, administration and supervision in Ohio chartered nonpublic schools per ORC 3301.071.
Please submit official transcripts with bachelor's degree conferred and date.

☐ **Non-bachelor's degree (Option B)**
(Superintendent/Chief administrative officer must verify qualifications below)
Valid only for teaching world languages, music, religion, computer technology or fine arts in Ohio chartered nonpublic schools per ORC 3301.071.
Please indicate requested teaching area(s):

☐ Computer Technology ☐ Music ☐ World Language (please specify):_____
☐ Fine Arts ☐ Religion

☐ **Non-chartered, Non-tax supported school (Option C)**
Valid only for teaching in a non-chartered, non tax supported school per ORC 3301.071.
For a listing of these schools please search keywords 'NCNT information" at education.ohio.gov.
Please submit official transcripts with either a bachelor's degree conferred and date or a diploma from a bible college or bible institute as described in ORC 1713.02.

☐ **Correct effective year to** _____ **$20**

DEGREE INFORMATION

Highest educational level completed (check only one):

☐ High school diploma/GED ☐ Associate ☐ Bachelor ☐ Master ☐ Doctorate ☐ Other (please specify):_____

School/College/University _____ State _____ Date of Completion _____

EFFECTIVE YEAR

The effective year for an Ohio Non-tax Certificate begins July 1, regardless of the date of issuance.

Certificate to **begin on July 1,** _____ .

SUPERINTENDENT SIGNATURE and MAIL TO ORGANIZATION
(All certificates are mailed to the employing Ohio school/district)

I hereby request a Non-tax Certificate for the individual named on this application.

****If the Non-tax certificate request is being made under Option B above, I hereby certify and attest that the applicant meets one of the following conditions (please check one).**

☐ The person has specialized knowledge, skills, or expertise that qualifies the person to provide instruction.

☐ The person has provided to the superintendent/chief administrative officer evidence of at least three years of teaching experience in a public or nonpublic school.

☐ The person has provided to the superintendent/chief administrative officer evidence of completion of a teacher training program.

NAME OF PROGRAM: _____

_____ _____
Signature of Ohio School Superintendent/Chief Administrative Officer Date

School/District _____ IRN # | | | | | | |

APPLICANT SIGNATURE

I certify under penalty of the loss of my right to teach or work in the schools of Ohio that the information provided on this page of the application is true and correct in every respect.

_____ _____
Signature of Applicant Date

_____
Print Name

Fees: The fee for a Non-tax Certificate is $200. The fee to correct the effective year is $20. Please enclose a money order or personal check payable to "**Treasurer, State of Ohio**" for each application. **DO NOT SEND CASH**. **Please Note:** $25 of the processing fee is non-refundable.

PLEASE MAIL THE APPLICATION TO:

Office of Educator Licensure, 25 South Front Street, Mail Stop 105, Columbus, Ohio 43215-4183.