

# New York State Certificate Recommendation Authorization - Undergraduate Student Form

By completing and signing this form I am authorizing the School of Education at Syracuse University to submit a recommendation for teacher/personnel certification to the New York State Dept. of Education upon the completion of a Syracuse University program leading to recommendation for certification.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Syr U NetID \_\_\_\_\_ Primary Non-Syr Email Address Used \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

SU ID (if known) \_\_\_\_\_ Date of Birth \_\_\_\_\_ Phone \_\_\_\_\_

Major \_\_\_\_\_ Graduation Date \_\_\_\_\_

## Requested Recommendation and Attestations:

\_\_\_\_\_ I am requesting Initial (first time) certification in \_\_\_\_\_

\_\_\_\_\_ My degree has posted to my transcript.

\_\_\_\_\_ I have applied and paid for my NYS teaching certificate through TEACH on-line services.

\_\_\_\_\_ Within 6 months, I plan to: \_\_Attend Grad School; \_\_Seek a Teaching Job; \_\_Undecided; \_\_Other

## EdTPA Safety-Net: (available *only* to candidates who student taught between March 2020 and August 2021)

\_\_\_\_\_ My student teaching term took place between March 2020 and August 2021.

\_\_\_\_\_ I have elected to complete the EdTPA.

\_\_\_\_\_ I am electing to complete the ATS-W exam in lieu of EdTPA. My exam date is/was: \_\_\_\_\_

\_\_\_\_\_ I did not student teach between March 2020 and August 2021. I am completing the EdTPA.

## Authorization

I authorize the School of Education at Syracuse University to release my social security number, date of birth, award title, program name, certificate title/type and degree date to recommend me for certification to the New York State Department of Education (TEACH).

Signature \_\_\_\_\_ Date \_\_\_\_\_

**PLEASE APPLY FOR YOUR CERTIFICATE AND VERIFY THAT YOUR DEGREE HAS POSTED BEFORE YOU RETURN THIS FORM. RETURN YOUR COMPLETED SIGNED FORM TO SOECAREER@SYR.EDU**

## For Office Use Only

Degree Awarded \_\_\_\_\_ Program \_\_\_\_\_ Graduation Date \_\_\_\_\_

Date of Recommendation \_\_\_\_\_ Recommended Certificate/s \_\_\_\_\_