***CEHHS Student Services***

*333. S. Twin Oaks Valley Road*

*San Marcos, CA 92096-0001 USA*

*760-750-4277 / 760-750-3539 (fax)*

[*www.csusm.edu/cehhs/studentservices/*](http://www.csusm.edu/cehhs/studentservices/)

SCHOOL OF EDUCATION

Credential & Graduate Programs

**OVERVIEW OF THE ON-LINE RECOMMENDATION PROCESS**

***First Step***

When we receive your application packet (*Credential Evaluation Request Form*) and confirmation of fee payment, we will review your file to make sure all requirements have been met. After our verification that requirements have been met, CSU San Marcos, CEHHS Student Services recommends you for your credential via the California Commission on Teacher Credentialing’s (CTC) on-line recommendation system.

***Second Step***

CTC will notify you via email that you have been recommended for your credential. CTC will also send you a link to use where you will then provide or confirm your contact and credential information. You will be asked to pay for the credential document on-line; payment by MasterCard or VISA debit/credit card is the only option for on-line recommendation.

Next, CTC notifies CSU San Marcos, CEHHS Student Services that all fees have been paid and notifies you a credential will be issued to you. The payment confirmation issued by the Commission may be used to verify your recommendation status with an employer.

***Third Step***

The Commission does not issue paper documents. Your credential is issued by CTC and posted to their official document web site. You may view and download document information at <http://www.ctc.ca.gov/>.

If you have any questions about the on-line process, please do not to hesitate to call us.

**CREDENTIAL EVALUATION APPLICATION & ON-LINE RECOMMENDATION REQUEST**

**RYAN CLEAR CREDENTIAL**

**$25.00 Credential Recommendation Fee**

(Refer to Credential Evaluation Fee Payment Form for payment information)

***INSTRUCTIONS:*** Form is fill-in enabled. Download copy to your own computer, open and complete form using computer’s tab key to navigate from field to field.  
If filling out by hand, please print.

SS#:       CSUSM Student ID#:       Date of Birth:

Legal Name:                   (       )

(as it will appear on credential) Last First Middle Former/Maiden

              

Street addressor P.O. Box City State Zip

Home Ph.:       Cell Ph.:       Work Ph.:

***Due to problems associated with district firewalls, please use email addresses other than your district email.***

Current email address**\***:

Alternate email address:**\***

**Permanent/Credential Mailing Information:**

              

Street addressor P.O. Box City State Zip

**PLEASE SIGN, DATE AND RETURN COMPLETED APPLICATION TO:**

CEHHS Student Services

Teacher Credentialing - UNIV 221

CSU San Marcos

San Marcos, CA 92096-0001

I authorize CSUSM to release information concerning my credential application to appropriate inquiring school districts and offices and to forward my credential application and supporting materials to the California Commission on Teacher Credentialing for issuance of the credential I have requested.

Signature: Date:

Name:       Social Security No.

**Request is for the following credential and authorizations:**

**Credential Type**:

**Subject area**:

**BCLAD: Spanish Emphasis** Yes  No

**Optional:** (Please complete worksheet for each SMA or SA requested. Additional information and worksheets are located at <http://www.csusm.edu/cehhs/studentservices/graduate/sasmaworkshops.html>)

**Subject Matter Authorization** **(SMA)**: (completed worksheet must be included)

Introductory:       Specific:

**Supplementary Authorization (SA):** (completed worksheet must be included)

Introductory:       Specific:

**Added Authorization Request:** **Subject area-**

Please submit original CSET exam results and official transcript for methods course taken. For candidates adding a Multiple Subject credential, please include verification of passing score for RICA or official transcript verifying successful completion of approved “teaching of reading” course. An official transcript is not required if the course work was taken at CSU San Marcos.

**CLEAR RYAN RECOMMENDATION ONLY**

**Please list where each course was taken and name of CPR training agency. If course work was taken at another institution, please attach official transcript. Official transcripts are not required if course(s) were taken at CSU San Marcos.**

**CLEAR REQUIREMENTS** Indicate where you took course:

|  |  |  |
| --- | --- | --- |
| 1. Mainstreaming | (EDUC 501 @ CSUSM) |  |
| 1. Technology | (EDST 630 or EDUC 422 @ CSUSM) |  |
| 1. Health Education | (EDUC 571 @ CSUSM) |  |
| 1. CPR training   (Please provide a copy of both sides of your CPR card.) | Infant, child and adult CPR | Agency name: |