EMERGENCY 30 DAY SUBSTITUTE TEACHER PERMIT
APPLICATION PROCESS

The Emergency 30-Day Substitute Teaching Permit authorizes the holder to serve as a day-to-day substitute teacher in any classroom, including preschool, kindergarten, and grades 1-12 inclusive. The holder may serve as a substitute for no more than 30 days for any one teacher during the school year, except in a special education classroom, where the holder may serve for no more than 20 days for any one teacher during the school year. This permit is valid for one year and is renewable.

- Schedule a Live Scan (fingerprint) appointment by calling 661-636-4672.

Please note that if you hold any of the following valid credentials or certificates: Preliminary, Clear, Life, Certificate of Clearance or Activity Supervisor Clearance Certificate you are exempt from the Commission on Teacher Credentialing fingerprint process and will only need to obtain employment prints. Holders of a valid teaching credential are exempt from having to obtain an emergency 30 day substitute teacher permit and are encouraged to inquire about a modified substitute packet.

Bring the following documents/items with you to the KCSOS Credential Services Office:

- Completed Fingerprint Clearance Form (usually received by mail within 2-10 days after fingerprint appointment has been completed)

- **Official** college / university transcripts or **original diploma** verifying degree *

- **Official** basic skills requirement passage (CBEST) – **Online Results Not Accepted** *

- Completed Certification of Tuberculin Skin Test or Chest X-Ray *

- Completed Certificate of Medical Examination of Applicants *

- Completed Substitute Information Form (this form is usually left with fingerprint technician on the day of fingerprinting)

- Credit Card with the VISA or MASTERCARD Logo to apply and pay for permit online

* ORIGINALS WILL BE SCANNED AND RETURNED TO YOU
Fingerprint clearance through the California Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI) is required from every applicant for any credential, permit, or certificate, unless fingerprint clearance is already on file the Commission on Teacher Credentialing.

Contact the Human Resources Department at (661) 636-4672 to schedule a Live Scan Appointment

☐ PRINTS FOR A CREDENTIAL AND EMPLOYMENT AS A SUBSTITUTE TEACHER or EMPLOYMENT WITH KCSOS

1. Dual prints for Teacher Certification and County-wide Substitute can **ONLY be processed at Kern County Superintendent of Schools** (Failure to do so may result in having to be re-printed and pay additional fees).

2. When you report to the Human Resources Department you will be required to bring the following items:

   a. A valid unexpired picture identification.
   b. The following fee:
      - $51.00 DOJ/FBI fee (certification) (effective October 1, 2007)
      - $12.00 Processing fee (effective June 1, 2003)
      - $63.00 Total

   The fee is payable by cash, money order or cashier's check payable to KCSOS. Correct change is appreciated.

3. The Human Resources Department will submit your fingerprints electronically to the Department of Justice/FBI.

4. You will receive a copy of the Request for Live Scan Service. The copy is your record that fingerprints for the Commission on Teacher Credentialing have been filed. **RETAIN THE ORIGINAL FOR YOUR RECORDS - WE CANNOT REPLACE YOUR COPY.**

5. The Human Resources Department should receive a response within 10 days. Please do not contact our office until the regular processing time has lapsed.

6. The verification of fingerprint clearance is your record that a DOJ Criminal Summary Report for substitute teaching in Kern County was received by this office. Please show it to the districts as verification that you have received fingerprint clearance for substitute employment. **RETAIN THE ORIGINAL FOR YOUR RECORDS.**

☐ PRINTS FOR EMPLOYMENT AS A SUBSTITUTE TEACHER (DOJ ONLY)

1. When you report to the Human Resources Department, you will be required to bring the following items:

   a. A valid unexpired picture identification.
   b. The following fee:
      - $32.00 DOJ/FBI fee (certification) (effective October 1, 2007)
      - $12.00 Processing fee (effective June 1, 2003)
      - $44.00 Total

   The fee is payable by cash, money order or cashier's check payable to KCSOS. Correct change is appreciated.

2. Your fingerprints will be submitted electronically to the Department of Justice by the Human Resources Department.

3. The Human Resources Department should receive a response within 10 days. Please do not contact our office until the regular processing time has lapsed.

7/28/2010
4. The verification of fingerprint clearance is your record that a DOJ Criminal Summary Report for substitute teaching in Kern County was received by this office. Please show it to the districts as verification that you have received fingerprint clearance for substitute employment. **RETAIN THE ORIGINAL FOR YOUR RECORDS.**

☐ PRINTS FOR TEACHER CERTIFICATION (DOJ/FBI)

1. When you report to the Human Resources Department you will be required to bring the following items:
   
   a. A valid unexpired picture identification.
   b. The following fee:
      
      $51.00 DOJ/FBI fee (certification) (effective October 1, 2007)
      $12.00 Processing fee (effective June 1, 2003)
      $63.00 Total

      The fee is payable by cash, money order or cashier's check payable to KCSOS. Correct change is appreciated.

2. Your fingerprints will be submitted electronically to the Department of Justice/FBI by the Human Resources Department.

3. You will receive a copy of the Request for Live Scan Service. The copy is your record that fingerprints for the Commission on Teacher Credentialing has been filed. **RETAIN THE ORIGINAL FOR YOUR RECORDS - WE CANNOT REPLACE YOUR COPY.**

7/28/2010
INFORMATION NECESSARY FOR SUBSTITUTE TEACHING

Please type or print your answers to all questions in ink and return to Human Resources.

Applicant Name: ☐ Mr. ☐ Mrs. ☐ Miss ☐ Ms. ________________________________

Social Security Number: XXX-XX-_________ E-Mail: __________________________

Mailing Address: _______________________________________________________

Telephone Numbers: (       ) __________________     (       ) ___________________   (       ) ________________

Home                                               Cell                                            Message

For questions 1-2 answered “Yes,” please explain on a separate piece of paper and attach.
1. Has any teaching credential you have held ever been suspended or revoked? ☐ Yes ☐ No
2. Have you ever been dismissed or asked to resign from any teaching or administrative position? ☐ Yes ☐ No
3. Are you retired from the California State Teachers Retirement System? ☐ Yes ☐ No

________________________________________________________  Expiration Date: ________________________

Type of Credential/Permit

I am willing to substitute teach in the following areas: (Limit your selection to no more than two areas. Please refer to Page 3 for Area Definitions.)

☐ BAKERSFIELD ☐ N. KERN ☐ W. KERN ☐ E. KERN ☐ DESERT ☐ KERN VALLEY ☐ EL TEJON

I will substitute in grades: ☐ K-8 ☐ K-12 ☐ Other ___-___

For questions 4-7 answered “Yes,” please provide explanation on Criminal Records Response.
4. Have you ever been convicted of a misdemeanor? ☐ Yes ☐ No
5. Have you ever been convicted of a felony? ☐ Yes ☐ No
6. Have you ever entered a plea of No Contest or Guilty to a misdemeanor? ☐ Yes ☐ No
7. Have you ever entered a plea of No Contest or Guilty to a felony? ☐ Yes ☐ No

A conviction will not necessarily disqualify you from employment. Each prospective employee must undergo a background clearance through the Department of Justice prior to employment. Fingerprint clearance is pursuant to Education Code Section 45125(a) as amended by AB 1610, Stats 1997.

I hereby certify that all statements made in this application are true. I agree and understand that any misstatement of material facts herein will cause (a) rejection of my application and (b) forfeiture on my part to any employment or payment as an employee in the service of the school districts in Kern County. I further agree to be fingerprinted, to submit to a complete medical examination, and upon employment, to furnish such proof of age and citizenship as may be directed.

______________________________________________                             __________________________
Applicant Signature (Mandatory)                                                                        Date

KCSOS Office Use Only

Medical Exam Form: ___________________________   DOJ Live Scan Date: ___________________________
TB Expiration Date: __________________________   DOJ Clearance Date: __________________________
TCC Issuance Date: ___________________________   Eligible to substitute teach on:__________________
Verified by: ___________________________  Kern County Superintendent of Schools
CRIMINAL RECORDS RESPONSE

NAME______________________________________________DATE_____________________________

Position applied for:______________________________________________________________________

Date of infraction:_______________________________________________________________________

Penal Code(s) if known: __________________________________________________________________

Brief explanation of infraction: _____________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
_______________________________________________________________________________________
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_______________________________________________________________________________________
_______________________________________________________________________________________

Do not list any convictions for violation of Health and Safety Code Sections 11357(b) or (c), 11364, or 11365 if the date of conviction for these sections is more than two (2) years prior to date of application.

A conviction will not necessarily disqualify you from employment.
AREA DEFINITIONS

Select no more than two (2). Your selection does not keep you from applying to any district. Please mark your selections on the Information Necessary for Substitute Teaching form.

BAKERSFIELD:
   All districts with a Bakersfield (city) address, including North/River (NW), Edison and Fairfax

NORTH KERN:
   Cities of Shafter, Wasco, McFarland and Delano

WEST KERN:
   Cities of Lost Hills, Maricopa, Taft, Belridge, Buttonwillow, McKittrick

EAST KERN:
   Cities of Arvin, Lamont, Vineland, DiGiorgio, Tehachapi, Caliente

DESERT:
   Mojave, Muroc, Southern Kern (Rosamond), Sierra Sands (Ridgecrest)

KERN VALLEY:
   Blake (Woody), Linns Valley (Glennville), Kernville, South Fork (Weldon)

EL TEJON USD:
   Lebec, Frazier Park, Pine Mountain Club
TUBERCULOSIS EXAMINATIONS

FREEDOM FROM ACTIVE TUBERCULOSIS IS REQUIRED FOR EMPLOYMENT IN A CALIFORNIA SCHOOL DISTRICT. VOLUNTEERS ARE ALSO REQUIRED TO SUBMIT TEST RESULTS. THE CREDENTIAL OFFICE MUST RECEIVE VERIFICATION AT THE TIME OF EMPLOYMENT AND EVERY FOUR (4) YEARS THEREAFTER.

The test may consist of an intra dermal skin test (which must be read within 48 hours) or an x-ray for those people for who the skin tests is not appropriate.

Suggested facilities and cost for skin test (although there are others) are as follows:

1. Your own doctor - To find a physician when you do not have one, call the Kern County Medical Society (325-9025). They will give you references to establish your own medical care.

2. Kern County Health Clinic – 100 Flower St. (868-0510)  
   Walk-ins – Monday 8-11 am  
   Cost $15 – Skin Test  
   Cost $47 – X-Ray  
   ($13/visit & $34/x-ray)

3. KCEOC – Family Health Clinic – 1611 First St (336-5300)  
   Walk-ins – Mon.–Fri. 9 am – 3:30 pm  
   Cost $12.50

4. Physicians Automated Lab (PAL) - 2801 H St. (325-0744)  
   Walk-ins – Mon.-Fri. – 6:30 am – 6:30 pm  
   Cost $15.00

5. Central Valley Occupational -4100 Truxtun Avenue (632-1540)  
   Walk-ins – Mon.-Fri. – 7:30 am – 5:30 pm  
   Cost $10.00

MEDICAL EXAMINATIONS

Education Code Section 44839 requires a person employed in a certificated position for the first time in a California school district or County Superintendent of Schools Office to undergo a physical examination to determine freedom from any disabling disease unfitting the person to instruct or associate with children.

Suggested facilities and cost for medical exams (although there are others) are as follows:

Central Valley Occupational - 4100 Truxtun Avenue (632-1540)  
   Cost $45.00  
   Walk-ins – Mon.-Fri. – 7:30 am – 5:30 pm

Clinica Sierra Vista – Refer to phone book for various locations  
   Cost $ 30.00 - $140.00

You may also check with the medical services facility at your local university.

All prices are subject to change at any time.
CERTIFICATION OF TUBERCULIN SKIN TEST OR CHEST X-RAY
(Required by Education Code Section 49406)

Name ____________________________________________         Address___________________________________________

This is to certify that the above named has submitted to an examination by me on ________________________20___________
A negative result indicates the person appears to be free from active tuberculosis.

The examination consisted of: (check one) The results were: (check one)

☐ An x-ray of the lungs ☐ Negative

☐ A T.B. skin test ☐ Positive

Name of Physician (print) ________________________________________________       Signature ________________________________________________

Address                                                                     City                                                                         License Number

The examination is a condition of employment and the expense shall be borne by the applicant.

Return to:                Human Resources Department
Kern County Superintendent of Schools Office
1300 17th Street - CITY CENTRE
Bakersfield, CA 93301-4533

IO:PS:36 Rev. 7/09
TO THE PROSPECTIVE TEACHER:

Education Code Section 44839 requires a person employed in a certificated position for the first time in a California school district or County Superintendent of Schools Office to undergo a physical examination to determine freedom from any disabling disease unfitting the person to instruct or associate with children.

Because you have expressed an interest to teach, we have accepted the responsibility of having the record of your medical exam on file in this office. Attached is a medical form for use by your physician or clinic to comply with this requirement.

If you feel you should be exempt from this requirement, or have any other questions, please call Human Resources at (661) 636-4750.

TO THE PHYSICIAN:

The person presenting this "Certificate of Medical Examination of Applicants for First Employment in California" wishes to make themselves available for employment as a teacher in K-12 classrooms throughout Kern County.

Depending on the assignment, the person will be required to perform the following functions:

1. Maintain classroom control conducive to productive learning.

2. Guide students in assigned school work.

3. Follow written and verbal instructions to comply with school district policies and procedures.

4. Maintain a safe and comfortable classroom environment.

5. Supervise playground activities and otherwise act as the teacher in charge of assigned students.
A medical certificate, in a form prescribed by the State Board of Education, showing that a person employed for the first time in a California school district or County Superintendent of Schools Office in a position requiring certification qualifications, is free from any disabling disease unfitting the applicant to instruct or associate with children is required. The Education Code also provides that:

- The medical certificate shall be submitted directly to the governing board or County Superintendent by a physician and surgeon licensed under the Business and Professions Code.
- The medical examination shall have been conducted not more than six months before the submission of the certificate.
- The pre-employment medical examination shall be at the expense of the applicant.
- The medical certification shall become a part of the personnel record of the employee and shall be open to the employee or his designee.
CERTIFICATE OF MEDICAL EXAMINATION OF APPLICANTS
FOR FIRST EMPLOYMENT IN CALIFORNIA

Name: _____________________________________________________________________

<table>
<thead>
<tr>
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<th>Middle</th>
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Address: ___________________________________________________________________

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<tr>
<th>Street</th>
<th>City</th>
<th>Zip Code</th>
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To The Physician:

The medical examination required of a person employed in a certificated position for the first time in a California school district or County Superintendent of Schools Office should be evaluated on the basis of the functions which will be required of the applicant upon employment. A description of the job functions is attached to this form.

Please indicate whether there is any evidence of infectious disease in a communicable state. Yes____  No_____    If so, please describe in detail below:

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

On the basis of my medical examination, the above-named individual is capable of performing the functions of the job subject to the following restrictions:

___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Date of Examination: _______________          _____________________________________

Signature of Physician

Name of Physician (print)                            License No.

To be returned by the prospective employee to the Office of the Kern County Superintendent of Schools, 1300 17th Street, Bakersfield, California 93301-4533.
RECOMMENDATION INFORMATION FORM

PERSONAL INFORMATION (please print legibly)

Applicant's Full Legal Name

First Middle Last

Applicant's Address

Street City & State Zip Code

Applicant's E-Mail Address (currently CTC cannot accept AOL e-mail addresses) Phone #

Applicant's Date of Birth  Applicant's Social Security Number

I am applying for a: Type of Permit / Credential

See Reverse for Document Titles

Please read the information below carefully. Your signature is required, acknowledging your agreement to follow the online recommendation process.

The Kern County Superintendent of Schools (KCSOS) Credentials Dept. will submit the online recommendation to the Commission on Teacher Credentialing (CTC). Following the online submission, CTC will send you an e-mail with further instructions on how to complete the online process and pay the appropriate fee(s).

Substitutes: you are not eligible to seek employment until you have completed the online application process, and have completed a TCC or provided proof of document issuance to the KCSOS Credentials Dept. via e-mail to camelton@kern.org. Employment fingerprint clearance (DOJ) is also required.

KCSOS is not responsible if you DO NOT complete the online process in a timely manner.

COMPLETING THE ONLINE RECOMMENDATION

You will receive an e-mail from CTC with instructions on how to complete the application process. The subject line on the e-mail will state “Application for New Teaching Credential.” The e-mail will contain the link “Credential Recommendation – Applicant,” which will direct you to the CTC’s website for completion.

Please follow the step-by-step instructions (provided on the right side of screen) to complete your part of the online application. The current fee is $57.00 ($55.00 application fee & $2.00 credit card service fee). VISA, MasterCard and debit cards with a logo are the only accepted forms of payment.

NOTE: Please indicate “Kern” when asked for County of Employment.

Professional Fitness Questions are mandatory.

Name and billing address must match credit card.

Print a copy of the Confirmation of Payment for your records.

CTC will send you another e-mail stating that your fees have been accepted. CTC has 14 business days to verify your information and grant your credential/permit. Any “yes” answers in the Professional Fitness questions may delay issuance. CTC will send a final e-mail stating that your application has been granted. Upon receipt, open the link and print the detailed version of your document.

I have read and understand the information provided hereinafore. I agree to follow the instructions provided regarding the online recommendation/application process.

Applicant’s Signature

Date:

Credentials Dept./Accepted by Date:
**Direct Online Applications:**

- 30 Day Substitute Teaching Permit (day to day substitute teaching)
- Administrative Services Credential (administrators including principal and superintendents)
- Certificate of Clearance (fingerprint clearance for student teaching)
- Certificate of Completion of Staff Development (teaching English learners)
- Clinical or Rehabilitative Services Credential (Audiology and Orientation & Mobility)
- Crosscultural, Language and Academic Development Certificate (teaching English learners)
- Education Specialist Instruction Credential (special education)
- Multiple Subject Teaching Credential (elementary general education)
- Pupil Personnel Services Credential (school counseling, social work, psychology, and child welfare & attendance)
- School Nurse Services Credential
- Single Subject Teaching Credential (middle/secondary general education)
- Specialist Instruction Credential (agriculture specialist)
- Specialist Instruction Credential (reading specialist)
- Speech-Language Pathology Services Credential (speech/language services)
- Teacher Librarian Services