

## INSTRUCTIONS FOR COUNTY SUBSTITUTE CERTIFICATE ISSUANCE

Applicants holding lifetime New Jersey instructional certificates may substitute without applying for the substitute certificate. This also applies to applicants holding a Certificate of Eligibility with Advanced Standing or Certificates of Eligibility. The procedure for County Substitute Certificate is as follows:

1. **Application Form** – applicant must complete area marked “To be Completed by Applicant” – School district is required to complete section “For District Use Only” (signature of superintendent and date approved by the board.)
2. **Official Transcripts** – supporting a minimum of 60 college credits from a regionally accredited college. (Also indicate maiden name on application if transcripts appear under maiden name.)
3. **Notarized Oath of Allegiance**. (Non Citizens must fill out “Non-Citizen Oath of Allegiance.”)
4. **Fee** - \$125.00 Check or Money Order payable to: “Commissioner of Education”. No cash will be accepted.

**Applicant brings 1, 2, 3, and 4 to their hiring school district.** District will send application to county office **pending criminal history clearance.**

(There are additional fees for fingerprinting and Administration Fees for Criminal History.)

5. **Rehire** – Applicant brings 1,3 & 4 to their School District. District will verify that applicant has been in continuous employment and provide Board Date of rehire.
6. **Nurse Substitutes**: Must also submit copy of valid NJ RN License. If a substitute nurse wants to also substitute teach, college transcripts must also be submitted.
7. **Vocational Substitute Certificate**-May be issued to applicant on the basis of appropriate work experience in lieu of 60 semester hour college credits. Work experience should be substantiated by a notarized statement of experience form. The Vocational Superintendent is required to evaluate your occupational experience.
8. **If an Emergent Hire is needed** – District shall attach the Emergent Hire Request Form, Board Minutes and Authorization of Criminal History Form to county office.
9. **Lost Substitute Certificate**-Submit a completed application, \$60.00 replacement fee, along with notarized Statement of Loss to the county office where certificate was originally issued.

### **A substitute may serve no more than 20 consecutive days in the same classroom**

If you wish to substitute at an additional Hunterdon County school district, present your valid sub certificate to that district for Board approval.

All sub certificates are issued for a 5 year period expiring July 1<sup>st</sup> or January 2<sup>nd</sup> of the fifth year. It is the applicants' responsibility to track their own expiration date. The district is required to track its' own substitutes.

If you hold a sub certificate issued in another county and would like to sub in Hunterdon, present your original certificate and criminal history clearance letter to the school district you wish to sub with. **YOU DO NOT NEED ANOTHER SUB CERTIFICATE.** However, the new district must comply with criminal history regulations.

**OUR LOCATION:** Hunterdon County Superintendent of Schools  
P.O. Box 2900, 10 COURT STREET  
Flemington, NJ 08822-2900

For additional information, view the county website [www.co.hunterdon.nj.us/schools.htm](http://www.co.hunterdon.nj.us/schools.htm) or call (908) 788-1462 or 788-1414.

(REV. 5/10)  
STATE OF NEW JERSEY - DEPARTMENT OF EDUCATION  
DIVISION OF FIELD SERVICES AND OFFICE OF LICENSURE AND CREDENTIALS  
SUBSTITUTE CREDENTIAL APPLICATION COUNTY: \_\_\_\_\_

This credential will be issued for a five-year period, but the holder may serve for no more than 20 total instructional days in the same position in one school district during the school year unless approved by the executive county superintendent for an additional 20 instructional days pursuant to N.J.A.C. 6A: 9-6.5(b). Such credentials, which are issued by the executive county superintendent of schools under the authority of the State Board of Examiners, are designed only for emergency purposes when the supply of properly certificated substitutes is inadequate to staff a school. They are intended only for persons temporarily performing the duties of a fully certificated and regularly employed teacher.

TO BE COMPLETED BY APPLICANT -- Please Type or Print Clearly

Name \_\_\_\_\_ Social Security # \_\_\_\_\_  
(First) (Middle/Maiden) (Last)

Address \_\_\_\_\_  
(street) (city) (state) (zip)

Date of Birth \_\_\_\_\_ E-Mail Address \_\_\_\_\_ Telephone \_\_\_\_\_

Are you a citizen of the United States? Yes ☐ No ☐

If no, have you filed an Affidavit of Intent to Become a Citizen? Yes ☐ No ☐ If yes, Alien Registration # \_\_\_\_\_

NOTE: The Affidavit of Intent to Become a Citizen is not a requirement for the substitute credential.

Have you ever been convicted of a crime in this or any other state? Yes ☐ No ☐

If yes, give the name of the municipality and attach statement giving details.

Have you ever had an educator's certificate revoked or suspended in this or any other state? Yes ☐ No ☐

If yes, attach statement giving details.

Have you taken the Oath of Allegiance? Yes ☐ No ☐

EDUCATION

Regionally-Accredited College Name	Location	Degree / Degree Date	Major	# Credits
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WORK EXPERIENCE (teaching)

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I certify that the above statements and data are correct: \_\_\_\_\_  
(Signature of Applicant) (Date)

**FOR DISTRICT USE**

DESIGNATED DISTRICT REPRESENTATIVE'S SIGNATURE AFFIRMING TRANSMITTAL OF APPLICATION

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

District \_\_\_\_\_ Date \_\_\_\_\_

**FOR COUNTY USE: REGULAR SUBSTITUTE APPLICATION**

☐ Application ☐ Oath ☐ Transcripts ☐ Fee  
Date of Criminal History Approval if applicable \_\_\_\_\_ or  
Date of Emergent Hire Approval if applicable \_\_\_\_\_  
CERTIFICATE # \_\_\_\_\_  
DATE OF ISSUE \_\_\_\_\_

**VOCATIONAL / SCHOOL NURSE APPLICATION**

☐ For vocational applicants/notarized statement of previous employment or valid occupational license.  
☐ RN License # \_\_\_\_\_ Exp. Date \_\_\_\_\_

New Jersey State Department of Education  
Office of Licensure and Credentials

**OATH OF ALLEGIANCE / VERIFICATION OF ACCURACY**

**IMPORANT:** This form is to be completed by only those individuals who are U.S. citizens. See Section B below.

**A. Basic Information** *Please print your name as it appears on any documentation that you are required to submit*

Last Name	First Name	Middle Name or Initial	
Street Address			
City	State	Zip	
Social Security Number	Date of Birth: Month	Day	Year
Email Address	Phone Number Including Area Code		

**Endorsement Information.** *Please enter below the code and print the name of each endorsement for which you are applying.*

Code Number	Name of Endorsement
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**B.** Choose one of the following. This form is to be completed only by those individuals who are U.S. citizens.

**Option I**

I, \_\_\_\_\_ do solemnly swear, (or affirm) that I will support the Constitution of the United States and the Constitution of the State of New Jersey, and that I will bear true faith and allegiance to the same and to the governments established in the United States and in this State, under the authority of the people, so help me God.

**Option II**

I, \_\_\_\_\_ do solemnly swear, (or affirm) that I will support the Constitution of the United States and the Constitution of the State of New Jersey, and that I will bear true faith and allegiance to the same and to the governments established in the United States and in this State, under the authority of the people.

**C. Certification** *Failure to complete these items will result in rejection of the candidate's application for certification.*

Have you ever had a certificate revoked or suspended in this or any state? If yes, enclose a statement indicating the action taken and provide the pertinent details.	<u>Circle whichever applies</u> Yes      No
Have you ever been convicted of a criminal offense in this or any other state or any jurisdiction outside of the United States? If yes, enclose a statement indicating the municipality where this occurred and provide the pertinent details.	<u>Circle whichever applies</u> Yes      No

**D. Verification of Accuracy**

I certify that all statements and information provided herein are true and accurate.

Applicant's Signature (in ink) \_\_\_\_\_ Date \_\_\_\_\_

Sworn and subscribed to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Notary Seal \_\_\_\_\_ Notary Signature \_\_\_\_\_

Once completed and notarized, this form must be given to school contact person who will attach to your final evaluation. The Summative Evaluation and all related documents are to be mailed to:

New Jersey Dept of Education  
Attn. Provisional Teacher Program Office  
P.O. Box 500  
Trenton, New Jersey 08625-0500

## CRIMINAL HISTORY FINGERPRINTING BACKGROUND CHECK PROCEDURE

### **NEW APPLICANTS:** (those not previously fingerprinted for education)

As of May 1, 2014, the Criminal History Review Unit has integrated the new IdentoGo Morpho Trust Fingerprinting form to be completed **only online**.

- All applicants must submit their Applicant Authorization and Certification by going to the Criminal History website at <http://www.nj.gov/education/educators/crimhist> and clicking on the "File Authorization and Make Electronic Payment for Criminal History Record Check."
- Applicant/Employee shall select the first choice "New Administration Fee Request" and then select one of the four options depending on their job position and employer.
- Applicant/employee must complete the Applicant Authorization & Certification (AA&C) form and make the required administrative fee payment with a credit or debit card.
- After the administrative fee payment has been approved, the applicant will be presented with three choices:
  1. View and print their Applicant Authorization & Certification (AA&C) confirmation page.
  2. Complete and print their IdentoGo NJ universal Fingerprint form.
  3. Schedule their Morpho Trust fingerprinting appointment. Payment of \$67.20 is required to make an appointment. Print out the payment voucher and appointment confirmation.

**TAKE ALL FORMS AND PHOTO ID TO YOUR FINGERPRINT APPOINTMENT. BRING ALL FORMS BACK TO THE BOARD OF EDUCATION OFFICE. COPIES WILL BE MADE.** When you have your fingerprints done the technician will scan your prints and return to a receipt attached to your universal form. This form must be returned to the hiring district.

### **ARCHIVE PROCESS:**

If you have previously been fingerprinted for education (after 2/21/2003), by Sagem-Morpho (now IdentoGo Morpho Trust), you should follow instructions for this online process. This will require you to have the PCN# (12 digits) from your previous Sagem-Morpho Universal form, or contact your previous employer for this number and then go to website above. Follow the link for "Archive Application Request". The cost for this process is not \$32.00 + a small processing fee.

If you have any questions please call the BOE office at 908-534-2896.