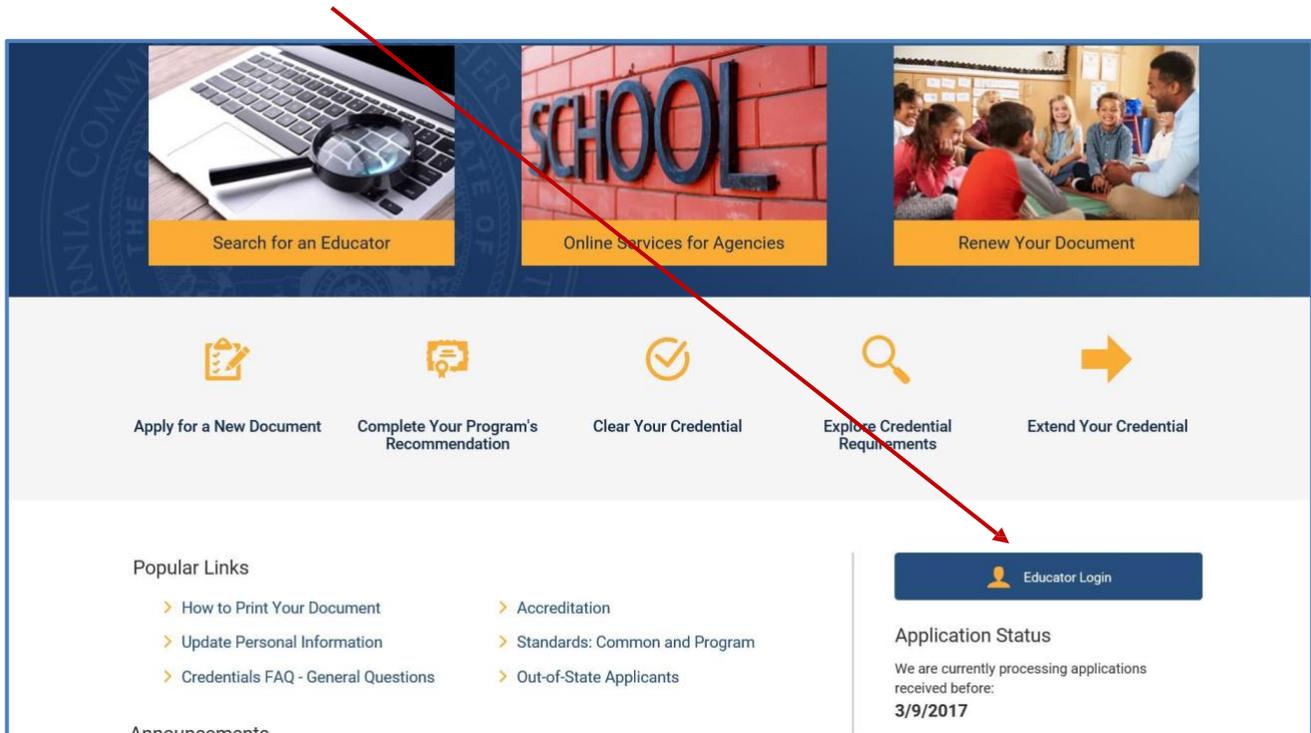


# How to Complete Your Online Recommendation

1. Click the **Educator Login** button on the Commission's Home page [www.ctc.ca.gov](http://www.ctc.ca.gov) to begin your application.



2. Log in with your User ID and Password.



3. You will be shown the Commission's Personal Information legal disclaimer. Click Next in the upper right corner to proceed.

The screenshot shows a web page with a blue header containing 'Login' and 'Search' buttons. Below the header, it says 'Welcome Back Educator' and 'Today is Tuesday, January 24, 2017'. A 'Next' button is in the top right corner. The main content is titled 'Personal Information' and contains several paragraphs of text regarding the collection and use of personal information, including Social Security Numbers and Individual Tax Identification Numbers. It also includes a 'Notice to Applicants for Issuance or Renewal of Credentials' section. At the bottom of the page, there are 'Back' and 'Next' buttons.

4. Proceed to the screen below where you can verify the information on your personal profile page. Click Next.

The screenshot shows a web page titled 'Agency User Search Educator Page'. It has a section for 'Add or Change Personal Information' with a note that asterisks indicate required fields. The profile information is as follows:

First Name*	TRAINING	Fingerprint Status:	Complete: No Action Required
Middle Name:	APPLICATION		
Last Name*	THREE1		
E-mail*	tkent@ctc.ca.gov		
Work Phone:	(999) 999-9999		
Home Phone:	(999) 999-9999		

Below this is the 'Last Known County of Employment: ALAMEDA COUNTY OFFICE OF EDUCATION' and a section for 'Add or Change Address' with the following details:

Address Line 1:	PO BOX 0750	State:	CA
Address Line 2:		Province:	
City:	SACRAMENTO	Country:	USA
		Zip Code*:	95811-0750

At the bottom of the page, there are 'Back' and 'Next' buttons. A red arrow points to the 'Next' button.

- Your personal Educator Page provides a view of your document history. Click on the option for "Employer Recommendation".

**NOTE:** If your program sponsor or employer informed you that it has submitted an application for a document but it does not appear on this screen, stop here and contact the agency immediately for assistance.

**DO NOT COMPLETE A NEW WEB APPLICATION IN PLACE OF A RECOMMENDATION**

Note: Information on Adverse and Commission Actions is available for this educator if a flag is displayed. If the Deceased flag is displayed, the licensee is deceased.

Document Application Adverse and Commission Actions

Document Number	Document Title	Term	Status	Issue Date	Expiration Date	Original Issuance Date	Grade	Special
> 230303169	30-Day Substitute Teaching Permit	Emergency	Valid	3/1/2024	3/1/2025	2/14/2022		
230037417	30-Day Substitute Teaching Permit	Emergency	Valid	3/1/2023	3/1/2024	2/14/2022		
220071067	30-Day Substitute Teaching Permit	Emergency	Valid	2/14/2022	3/1/2023	2/14/2022		

Select one of the options below to start a new application for licensure. If your charter school, school district, or county has applied on your behalf then select "Employer Recommendation".

- Click on the small blue-gray arrow on the end to highlight the row. Then click on the drop down box and select "Yes."

CA.GOV Commission on Teacher Credentialing

Back

Note: If you have questions about the information displayed below, please click here for a listing of Commission contacts.

Last Name: THREE1 Last Known County of Employment: ALPINE COUNTY OFFICE OF EDUCATION  
 First Name: TRAINING Adverse and Commission Actions Indicator:  
 Middle Name: APPLICATION Fingerprint Process Complete: Y

Note: Please verify County of Employment is current.  
 Note: Information on Adverse and Commission Actions is available for this educator if a flag is displayed.  
 Note: If the fingerprint process does not display as "Complete", please refer to the Fingerprint Information on our website.

Document Application Adverse and Commission Actions

Document Number	Document Title	Term	Status	Issue Date	Expiration Date	Original Issuance Date	Grade	Special Grade	Recommending Agency
> 801210013	Career Substitute Teaching Permit	Emergency	Valid	5/1/2013	6/1/2014	5/1/2013			
> 801200011	30-Day Substitute Teaching Permit	Emergency	Valid	4/1/2011	4/1/2012	3/1/2010			
> 801200010	30-Day Substitute Teaching Permit	Emergency	Valid	3/1/2010	4/1/2011	3/1/2010			
> 801200009	Administrative Services Credential	Preliminary	Valid	5/1/2009	6/1/2014	5/1/2009			ALLIANT INTERNATIONAL UNIVERSITY

Recommendations

Complete Your Program's Recommendation

Select	Document Title	Term	Application Status	Issue Date	Return Reason
> No	Multiple Subject Teaching Credential	Preliminary	Awaiting Payment	10/19/2011	
> No	Multiple Subject Teaching Credential	Clear	Awaiting Payment	5/26/2012	

Renew

Select "yes" next to the Document Title and click "Renew"

7. Select "Complete" to continue the application process.

The screenshot shows the CA Commission on Teacher Credentialing web application. At the top left is the logo with 'CA .GOV' and 'Commission on Teacher Credentialing'. Below the logo is a navigation bar with 'Agency User' and 'Search' buttons, and a 'Educator Page' tab. The main content area features a table of documents with columns: Document Number, Document Title, Term, Status, Issue Date, Expiration Date, Original Issuance Date, Grade, and Special Grade. Below this table is a section titled 'Complete Your Program's' with a 'Complete' button and a 'Return Application to Authorized Agency' button. A table below this section has columns: Select, Document Title, Term, Application Status, Issue Date, and Return Reason. A red arrow points to the 'Return Reason' column, which contains a text input field with the placeholder text 'Return Reason Here'. Below this is a 'Renewals' section with a 'Renew' button and a 'No Records' indicator.

Document Number	Document Title	Term	Status	Issue Date	Expiration Date	Original Issuance Date	Grade	Special Grade
801210013	Career Substitute Teaching Permit	Emergency	Valid	5/1/2013	6/1/2014	5/1/2013		
801200012	30-Day Substitute Teaching Permit	Emergency	Valid	4/3/2012	5/1/2013	3/1/2010		
PSTCZTmg	Multiple Subject Teaching Credential	Preliminary	Valid	10/19/2011	11/1/2016			
801200011	30-Day Substitute Teaching Permit	Emergency	Valid	4/1/2011	4/1/2012	3/1/2010		

Select	Document Title	Term	Application Status	Issue Date	Return Reason
No	Multiple Subject Teaching Credential	Preliminary	Awaiting Payment	10/19/2011	
Yes	Multiple Subject Teaching Credential	Clear	Awaiting Payment	5/26/2012	Return Reason Here

**NOTE:** If you see an error on the document submitted, enter a Return Reason and select the **Return Application to Authorized Agency** button. After a document is returned, it will no longer appear on this page until it is resubmitted by the program sponsor or employer.

Recommended documents will only appear for 90 days. If the recommendation application is not completed and paid for within this timeframe, it will be purged by the system and the agency must resubmit the application.

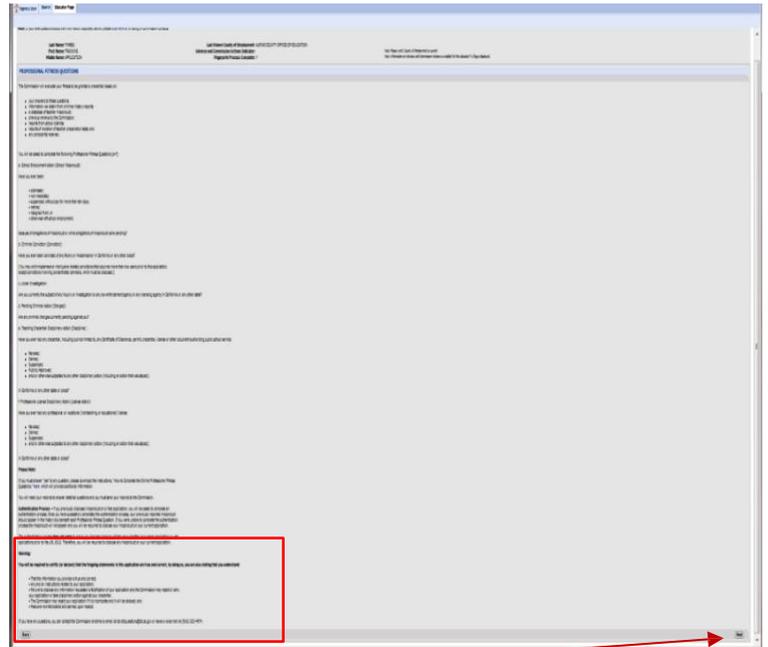
8. Read the entire Disclosure page for the Professional Fitness questions. Pay particular to the last part before continuing:

**Warning:**

**You will be required to certify (or declare) that the forgoing statements in this application are true and correct, by doing so, you are also stating that you understand:**

- That the information you provide is true and correct;
- Any and all instructions related to your application;
- Failure to disclose any information requested is falsification of your application and the Commission may reject or deny your application or take disciplinary action against your credential.
- The Commission may reject your application if it is incomplete and it will be delayed; and
- Fees are nonrefundable and earned upon receipt.

If you have any questions, you can contact the Commission anytime by email at [ctc-pfqquestions@ctc.ca.gov](mailto:ctc-pfqquestions@ctc.ca.gov)



9. Answer each of the Professional Fitness Questions. If you need assistance completing the Professional Fitness Questions, [click here](#). Complete all required fields of the Oath and Affidavit, and click Submit Payment. **Click Submit Payment only once!**

**\* Required Field**

**Before you proceed to payment, you must indicate (by selecting the box) that you agree and understand the duties required of the Child Abuse and Neglect and Reporting Act and the Oath and Affidavit:**

**Child Abuse and Neglect Reporting Act**

"As a document holder authorized to work with children, it is part of my professional and ethical duty to report every instance of child abuse or neglect known or suspected to have occurred to a child with whom I have professional contact.

I understand that I must report immediately, or as soon as practicably possible, by telephone to a law enforcement agency or a child protective agency, and will send a written report and any evidence relating to the incident within 36 hours of becoming aware of the abuse or neglect of the child.

I understand that reporting the information regarding a case of possible child abuse or neglect to an employer, supervisor, school principal, school counselor, coworker, or other person is not a substitute for making a mandated report to a law enforcement agency or a child protective agency.

I understand that the reporting duties are individual and no supervisor or administrator may impede or inhibit my reporting duties.

I understand that once I submit a report, I am not required to disclose my identity to my employer.

I understand that my failure to report an instance of suspected child abuse or neglect as required by the Child Abuse and Neglect Reporting Act under Section 11166 of the Penal Code is a misdemeanor punishable by up to six months in jail or by a fine of one thousand dollars (\$1,000), or by both that imprisonment and fine.

I acknowledge and certify that as a document holder, I will fulfill all the duties required of a mandated reporter."

I have read and understand my required duties under the Child Abuse and Neglect Reporting Act (Penal Code §11164ff.) \*

**I solemnly swear (or affirm) that I will support the Constitution of the United States of America, the Constitution of the State of California, and the laws of the United States and the State of California. I hereby certify (or declare) under penalty of perjury under the laws of the State of California that all the foregoing statements in this application are true and correct.**

Oath and Affidavit \*

Date: 12/01/2014

City \*:

County (or N/A) \*:

State/Province/Region (or N/A) \*:

Country \*: -Select-

10. On the next page, click the Process Payment button to move forward.

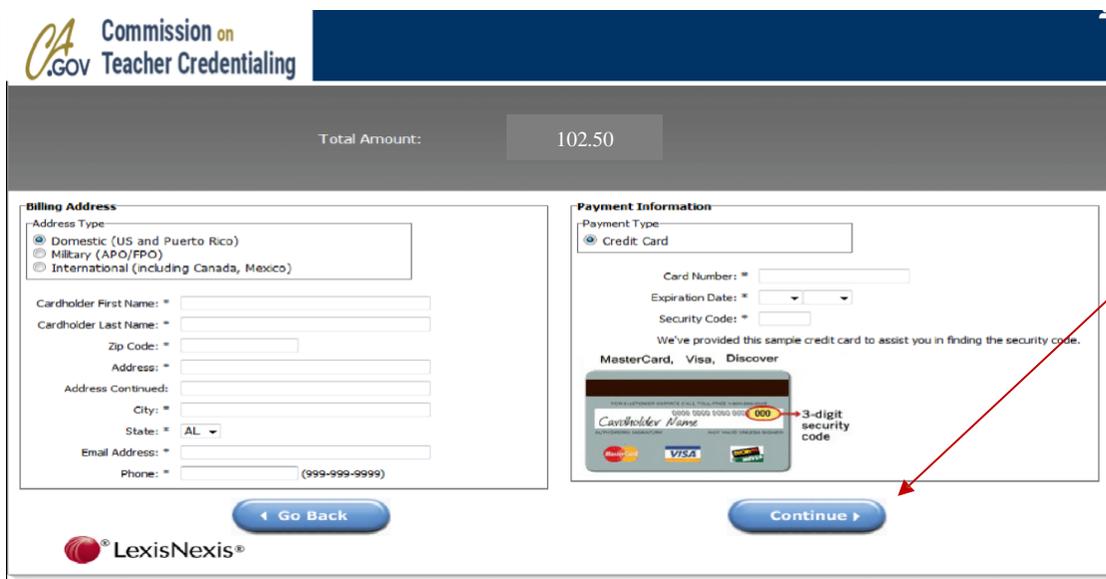
Please do not use the BACK or REFRESH buttons.

Click the button below to Process your Payment.

11. The display shows the document applied for and the amount to pay. Click the Continue button.



12. Complete the billing verification information for LexisNexis. Choose to pay with credit card (can also use debit card with Visa or MasterCard logo). Click Continue button when finished.



13. Verify all the payment information is correct, including email address. Click Complete Payment button. **Do not click the Complete Payment button more than once! After clicking Complete Payment, do not use the Back button in the web browser. Wait for the Confirmation page to be displayed.**

**NOTE: The application fee is earned upon receipt and is not refundable. (Reference: Title 5, California Code of Regulations, Section 80487)**

Commission on Teacher Credentialing

Total Amount: 102.50

**Billing Address**

Cardholder First Name : nancy  
Cardholder Last Name : passaretti  
Zip Code : 99999  
Address : 1900 capitol avenue  
Address Continued:  
City : sacramento  
State : CA  
Country : United States of America  
Email Address : npassaretti@ctc.ca.gov  
Phone : 999-999-9999

**Payment Information**

Card Number : \*\*\*\*\*0248  
Expiration Date : 01/2015

By checking this box, you are authorizing the payment of the bill amount.

Go Back Complete Payment

LexisNexis®

14. On the Confirmation page, use the 1st link provided to obtain a printable receipt for your reference. After printing your receipt, you can return to CTC Online with the 2nd link “please click [HERE](#).”

Commission on Teacher Credentialing

Receipt

Payment Date: 12/01/2014 02:42 PM PST Payment Status: AUTHORIZED  
Confirmation Number: 50024330  
Payment Method: Credit Card (MASTERCARD) \*\*\*\*\*0248

Bill To: nancy passaretti  
1900 capitol avenue  
sacramento, CA - 99999 United States of America

Payment Towards	Amount	ID
CTC Document	\$72.50	1-2F3S1X
		Activity Supervisor Clearance Certificate

Agency Amount \$7  
Total Amount \$7: 102.50

Click here for a printer friendly receipt

To return to the CTC application, please click [HERE](#).

Your payment was made through paymentsolutions.lexisnexis.com, one of the LexisNexis VitalChek Net. 102.50

For payment support, please send an email to paymentsolutions@lexisnexis.com.

For CTC Assistance, please send an email to CTCOnline@ctc.ca.gov

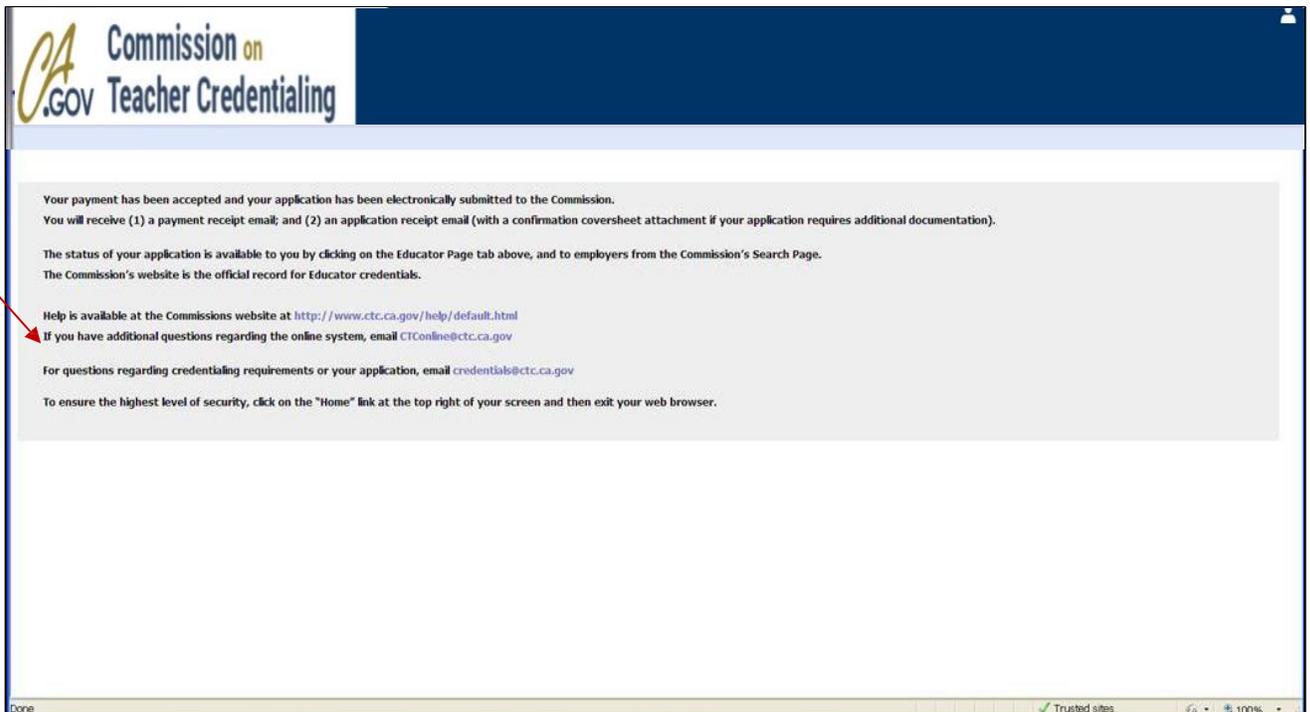
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TRUSTe CERTIFIED PRIVACY

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15. The final landing page provides directions back to the Educator page or to log out of CTC Online.



**Note:** If you answered "yes" to any of the Personal and Professional Fitness questions you must send the required supporting materials to the Commission as per the instructions provided.