REQUEST FOR EMERGENCY CREDENTIAL/PERMIT

(THIS FORM TO BE COMPLETED BY PRINCIPAL FOR CURRENT CERTIFICATED EMPLOYEES)

CHECK ONE:

☐ LIMITED ASSIGNMENT ☐ MULTIPLE SUBJECT FULL-TIME ☐ MULTIPLE SUBJECT DAY-TO-DAY SUB

☐ SPECIALIST-SPECIALIST EDUC. ☐ SINGLE SUBJECT FULL-TIME ☐ SINGLE SUBJECT DAY-TO-SUB.

LAST NAME FIRST MIDDLE PERS ID/EMP NO SOCIAL SECURITY #

BASIC TEACHING CREDENTIAL:_____ _____ _____ _____

TYPE LEVEL/SUBJECT EXPIRATION DATE CURRENT STATUS

SHORTAGE FIELD REQUESTED: _____ TO TEACH _____ PERIODS/DAY

☐ THIS TEACHER HAS BEEN ADVISED TO REPORT TO THE CREDENTIAL SERVICES UNIT, 333 SOUTH BEAUDRY AVENUE, BEAUDRY SITE, 15TH FLOOR (213) 241-6520 FOR PROCESSING OF THE APPLICATION. THE FOLLOWING MATERIALS WILL BE REQUIRED:

1) POSTAL MONEY ORDER FOR CURRENT APPLICATION FEE;
2) COMPLETE SET OF OFFICIAL COLLEGE TRANSCRIPTS WITH EMBOSSED SEALS;
3) COPY OF BASIC TEACHING CREDENTIAL.

PRINCIPAL DATE

DIRECTOR, CERT. PLACEMENT OFFICE DATE

SCHOOL DISTRICT

CREDENTIAL ISSUED EFFECTIVE DATE

CREDENTIAL ASSISTANT DATE

LAUSD HR FORM 1006-7 11/06

HR1006