



Credential Information
BTSA Induction Eligibility

To determine your eligibility to clear your credential through the BTSA Induction Program, please complete this form.

Please answer all questions completely and print clearly.

Date: _____

Date of Hire: _____

District: _____

PERSONAL INFORMATION:

Name: _____ Full Time Employee: Yes No
First Middle Last

SSN: _____ If part-time, what percent do you work? _____

Date of Birth: _____ Home Phone Number: () _____

Home Address: _____ Elementary grade you will teach: _____
 _____ Zip: _____ ^{or} Middle School Grade/Subject: _____

Home E-mail: _____ School Site: _____

School Phone Number: _____ School E-mail: _____

Teacher Preparation College/University _____ Credential Type: _____
 (Multiple or Single Subject)

Circle appropriate current credential: Intern Preliminary Clear

TEACHER PREPARATION (Check all that apply):

I have previously participated in a BTSA Induction program. Name of BTSA Program: _____
 _____ Date of Participation _____ Number of years of Participation: ____

I completed a 100% Intern Program. # of years in program _____ University _____

TEACHING EXPERIENCE: With a minimum of 2 years previous teaching experience you may be eligible to complete requirements for a clear credential through an *Early Completion Option*.

	Number of years in California	Years out-of-state
Years of <i>credentialed</i> teaching experience		
Years of private school teaching experience		

HR Department: We must notify teachers who are eligible for BTSA Induction as soon after their hire date as possible. **Please have all new hires complete this form. Give the completed form to your District BTSA Coordinator as soon as possible.**

District BTSA Coordinator: Send/fax this completed form as soon as possible.

SUPPORT PROVIDER INFORMATION:

Name _____ **Grade** _____ **School** _____

E-mail: _____

Home _____ **Work** _____

Phone: _____

Home: (opt) _____ **Work** _____

1 copy to District BTSA Coordinator. Fax copy to Sharon Weight, Consortium Coordinator - Fax: (408) 341-7255

FAXED From (Name) _____ Phone Number _____