

**APPLICATION FOR LEVEL II CERTIFICATE
FORM PDE 338 P
See Instructions on back of this form**

APPLICANTS: Please note the following information in regard to your Social Security Account Number (SSAN)
 DATA REQUIRED BY THE FEDERAL PRIVACY ACT (5 U.S.C. Section 552a note)
 AUTHORITY: 24 P.S. Section 1224.
 PRINCIPAL PURPOSE(S): To be used for registration and maintenance of records of all certificated persons as having met qualifications for teaching.
 ROUTINE USES: Used by the Pennsylvania Department of Education for the (1) evaluation, registration, and maintenance of certification records, (2) identification and collection of criminal/disciplinary records for certified educators and candidates for certification, and (3) provision of certification data to authorized personnel and agencies.
 DISCLOSURE: Mandatory. Withholding requested SSAN will result in denial of a candidate's application for certification.

PART A: APPLICANT

Last Name	First Name	MI	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%; height: 20px;"> </td> <td style="width: 12.5%; height: 20px;"> </td> <td style="width: 12.5%; height: 20px;"> </td> <td style="width: 12.5%; height: 20px;"> </td> <td style="width: 12.5%; height: 20px;"> </td> <td style="width: 12.5%; height: 20px;"> </td> <td style="width: 12.5%; height: 20px;"> </td> <td style="width: 12.5%; height: 20px;"> </td> </tr> <tr> <td colspan="8" style="padding: 5px;">Social Security Number</td> </tr> </table>									Social Security Number							
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PART B: OFFICIAL RECOMMENDATION (All fields must be completed.)

IMPORTANT: Multiple school districts: If employee has held positions with more than one school entity, a PDE 338 P form should be submitted for service time in each entity. **Multiple areas:** If employee served in multiple areas (i.e. Elementary and Secondary School Counselor), enclose a separate statement of experience showing percentage of time (per day or per week) served in each specific certification area.

I certify that the applicant was employed from _____ to _____ and performed
 Month/Day/Year Month/Day/Year
 satisfactory service on a _____ certificate in the following
 (Type/Subject Area)
 assignment(s) _____
 (Assignment including subject and grade level)

Induction

 (Initials) I verify that the applicant has satisfactorily completed this school entity's Pennsylvania Department of Education Approved Induction Program as outlined in §49.16 of the Regulations of the State Board of Education of Pennsylvania, Chapter 49. If the induction program was completed at another school entity, written confirmation from the chief school officer of that entity must accompany this application.

General Requirements

 (Initials) I verify that the applicant is known and regarded by this school district as a person of good moral character and possesses qualities and professional knowledge and skill which warrant issuance of the requested certificate. (Sections 1109 and 1209 of the Public School Code of 1949, Title 22 Pa. Code, §49.12)

 (Initials) I verify that the applicant has achieved a satisfactory rating on an evaluation of basic skills knowledge, professional knowledge and practice and subject matter knowledge. The evaluation is maintained in the employee's personnel file.

Signature of School Superintendent	Title	Date
Name of School District	County	Telephone Number
Street Address	City	State
Zip Code		

INSTRUCTIONS FOR APPLICATION FOR LEVEL II CERTIFICATION

FORM PDE 338 P

The **General Application, Form PDE 338 G, *MUST be submitted with all application requests.*** If you do not include the 338 G form, your complete application packet will be returned to you. All requests must be accompanied by a Fifteen Dollar (\$15.00) U.S. Money Order made payable to: Commonwealth of Pennsylvania. Personal checks, cash and credit cards will not be accepted. The Commonwealth will retain the fee whether or not the transaction results in the issuance of a certificate. Mail the application and supporting documents to: Bureau of Teacher Certification and Preparation, Pennsylvania Department of Education, 333 Market Street, Harrisburg, PA 17126-0333.

Form PDE 338 G and Form PDE 338 P will constitute your application for the Instructional II, Educational Specialist II, Supervisory II or Administrative II certificate. Candidates for the Vocational II Certificate must apply through the preparing Vocational Teacher preparation institution using Forms PDE 338 C, PDE 338 P and PDE 338 G.

APPLICANT

1. Complete PART A, on an original form only, by **printing in capital letters with dark blue or black ink** your Last Name, First Name and Middle Initial and entering your Social Security Number.
2. Have your employing School Superintendent or designated school official complete PART B: Recommendation of School Official and return it to **you**. All requested information must be supplied. Please note that beginning and ending dates must include month, day and year and that employers must provide their signature, title, school address and telephone number.
3. After this form is completed by the employing School Superintendent or designated school official and returned to **you**, check the information for completeness before adding it to your envelope.

OFFICIAL RECOMMENDATION

Complete PART B **using dark blue or black ink.**

1. All requested information must be supplied. Please note that beginning and ending dates must include month, day and year.
2. If the employee was a teacher, counselor, supervisor or principal, please indicate the grade levels and/or academic subjects taught.
3. Read and initial all verification statements (items 5 and 6).
4. Sign the application and print your Title and the Date.
5. Print the School District Name, Telephone Number, County and complete Address.
6. Return the form to the applicant, **NOT** to the Bureau of Teacher Certification and Preparation. The applicant must forward this form, along with the PDE 338 G form, to the Bureau for processing.