

OATH OF ALLEGIANCE / VERIFICATION OF ACCURACY

IMPORTANT: 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

Tracking Number

Email Address

Phone Number Including Area Code

Are you applying for the New Charter School Certificates? Circle whichever applies YES NO

Are you a military veteran? Circle whichever applies YES NO

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

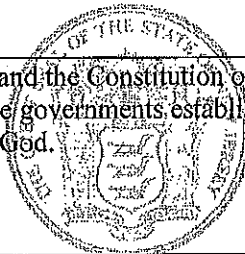
Code

Name of Endorsement

B. Oath of Allegiance Choose one of the following.

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.

Circle whichever applies

1. Have you ever been convicted of, pled guilty, no contest or *nolo contendere* to, or had adjudication withheld to a crime or offense, including DUI, in New Jersey or any other state or jurisdiction? If yes, complete and submit a Criminal/Offense Information Form. Yes No

2. Have you ever had an education or other professional certificate, license or credential revoked, suspended, invalidated or denied for cause in New Jersey or any other state or jurisdiction? * Yes No

3. Have you ever surrendered or relinquished an education or other professional certificate, license or credential in New Jersey or any other state or jurisdiction? * Yes No

4. Are you the subject of any pending action or proceedings against your education or other professional certificate(s), license(s) or credential(s) in New Jersey or any other state or jurisdiction? * Yes No

5. Have you ever resigned, retired or been dismissed or suspended from an education-related position in New Jersey or any other state or jurisdiction following allegations of misconduct? * Yes No

6. Are you the subject of any civil, criminal or administrative investigation in New Jersey or any other state or jurisdiction? * Yes No

* If any answer to Questions 2 through 6 is "yes," complete and submit an Additional Information For the Oath of Allegiance Form.

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, mail the form to:

New Jersey State Department of Education
Office of Certification and Induction
P.O. Box 500
Trenton, New Jersey 08625-0500

Attention: Oath of Allegiance/Verification of Accuracy

New Jersey State Department of Education
Office of Certification and Induction

**ADDITIONAL INFORMATION FOR THE OATH OF ALLEGIANCE
FOR THE APPLICATION OF CERTIFICATION**

Identification Information. Please print clearly.					
Last Name		First Name		Middle Name/Initial	
Street Address					
City			State		Zip
Social Security Number		Date of Birth	Month	Day	Year

I. Please select (✓) appropriate question(s) from the list below and provide pertinent details. The State Board of Examiners and teacher licensing authority require that you provide additional information and documentation. The State Board of Examiners will review the information provided to determine if your application can be processed.

- 1. Have you ever had an education or other professional certificate, license or credential revoked, suspended, invalidated or denied for cause in New Jersey or any other state or jurisdiction?
- 2. Have you ever surrendered or relinquished an education or other professional certificate, license or credential in New Jersey or any other state or jurisdiction?
- 3. Are you the subject of any pending action or proceedings against your education or other professional certificate(s), license(s) or credential(s) in New Jersey or any other state or jurisdiction?
- 4. Have you ever resigned, retired or been dismissed or suspended from an education-related position in New Jersey or any other state or jurisdiction following allegations of misconduct?
- 5. Are you the subject of any civil, criminal or administrative investigation in New Jersey or any other state or jurisdiction?

II. Please provide pertinent details regarding your "yes" answer to question 1, 2, 3, 4, or 5 from section (I) above and attach any official documentation.

III. You may provide any additional information or documentation that you would like the State Board of Examiners to consider. If you wish to provide additional information, please attach additional sheets.

I certify that the foregoing information is true. I am aware that I am subject to punishment if I willfully provide incorrect or misleading information.

Signature

Date (mm/dd/yyyy)

Once completed, return this form to: Coordinator for the State Board of Examiners, New Jersey Department of Education, P.O. Box 500, Trenton, New Jersey, 08625-0500.

Note: Pursuant to N.J.A.C. 6A:9B-4.2, candidates for certification must provide information regarding their criminal history, which will then be reviewed by the State Board of Examiners. Your application for certification may not be processed until you complete and return this form to the State Board of Examiners. In accord with N.J.A.C. 6A:9B-5.6, fees are nonrefundable. If you do not complete the application process, you may not request that your money be returned to you.

OCI 3/31/2016

