

<b>DUPLICATE PUBLIC CERTIFICATE OR NAME CHANGE FORM PDE 338 D</b> (Refer to instructions included with this two page form)	PDE USE ONLY  CONTROL NO.
---------------------------------------------------------------------------------------------------------------------------------------	---------------------------------

APPLICANTS: Please note the following information in regard to your Social Security Number (SSN)  
 DATA REQUIRED BY THE FEDERAL PRIVACY ACT (5 U.S.C. Section 552a note)  
 AUTHORITY: 24 P.S. Section 1224.  
 PURPOSE(S): To be used for (1) registration and maintenance of records of all certificated persons as having met qualifications for teaching, (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. Failure to disclose will prevent further processing of the application.

**SECTION I – PERSONAL INFORMATION (please print or type)**

1. Last Name	First Name	Middle Initial	2. Social Security Number
3. Address			4. Date of Birth (mm/dd/yyyy)
City/State/Zip Code			5. <input type="checkbox"/> Male <input type="checkbox"/> Female
6. Telephone Home/Cell (    )		Work Phone (    )	7. E-Mail Address
8. Please list all former name(s) beginning with the most recent			9. Are you a United States Citizen?
_____			<input type="checkbox"/> Yes
_____			<input type="checkbox"/> No
Last	First	MI	

**SECTION II-NAME CHANGE**

Name Change (No Fee Required-an updated certificate will be issued)

Proof of a name change must be submitted with one of the following documents:

- Copy of Marriage Certificate
- Copy of Court Order
- Notarized Statement of Name Change

**SECTION III-DUPLICATE CERTIFICATE**

Duplicate Certificate (Fee Required: \$40.00 signed Money Order)

Area of Certificate: \_\_\_\_\_ Year Certificate Issued: \_\_\_\_\_

Education:

Name of College/University Attended	State	Dates Attended	Degree and Date of Conferral

Applicant Social Security Number: \_\_\_\_\_

## SECTION IV-BACKGROUND

**Read and answer each question *carefully*...ensure that you have selected the appropriate check box. Incorrectly checking a box may significantly delay the processing of your application. Please refer to the instruction sheet for further information.**

1. Have you ever been the subject of a child abuse investigation or report in this or any other state, territory or country? (If yes, indicate whether the investigation or report is unfounded, indicated or founded by checking the appropriate box)	<input type="checkbox"/> Unfounded <input type="checkbox"/> Indicated <input type="checkbox"/> Founded <input type="checkbox"/> No
2. Are you currently the subject of any misconduct investigation by an employer? (If yes, refer to instructions)	<input type="checkbox"/> Yes <input type="checkbox"/> No
3. Have you ever resigned from or otherwise left any employment (e.g., settlement agreement) while allegations of misconduct were pending or under investigation? (If yes, refer to instructions)	<input type="checkbox"/> Yes <input type="checkbox"/> No
4. Is there disciplinary action pending by a licensing agency in this or any other state, territory or country? (If yes, refer to instructions)	<input type="checkbox"/> Yes <input type="checkbox"/> No
5. Have you ever had any certificate or license for any profession denied, revoked, suspended, surrendered or received a public reprimand in this or any other state, territory or country? (If yes, refer to instructions)	<input type="checkbox"/> Yes <input type="checkbox"/> No
6. Have you ever been convicted of a crime classified as a misdemeanor or felony in this state or any other state, territory or country? (If yes, refer to instructions.) <i>(For purposes of this question, convicted includes pleas of nolo contendere and guilty pleas. However, summary offenses do not need to be acknowledged.)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Are criminal charges pending against you, or are you the subject of an inquiry or investigation by a law enforcement agency in this or any other state, territory or country? (If yes, refer to instructions)	<input type="checkbox"/> Yes <input type="checkbox"/> No

## SECTION V-AFFIDAVIT

*I certify that the information provided in this application, including all statements, transcripts and documentation, are correct and true. I understand that the falsification of any statement or document may result in professional discipline, including revocation of my Pennsylvania certificate.*

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

PDE 338 D (Revised 03/09)

**DUPLICATE PUBLIC CERTIFICATE OR NAME CHANGE  
FORM PDE 338 D  
PRINT WITH DARK BLUE OR BLACK INK**

**SECTION I: Personal Information**

1. Print your Last Name, First Name and Middle Initial.
2. Print your Social Security Number.
3. Print your complete Address and Zip Code.
4. Print your Date of Birth.
5. Check the appropriate box for “Male” or “Female”.
6. Print your telephone numbers in the event you must be contacted.
7. Print your current e-mail address.
8. List all former names, starting with your maiden name, if applicable.
9. Please state your citizenship status by checking the “yes” or “no” box. If you are not a U.S citizen, you must enclose the following documents with your application:
  - A copy of the front and back of your permanent resident visa, which permits you to permanently reside and work in the United States.
  - If you have become a citizen since submitting your last application, you must return your original Alien Provisional Certificate as well as a copy of your U.S. Naturalization Paper for conversion.

**If the documentation noted above is not submitted with the PDE 338 D form, the application will be returned to you.**

**SECTION II: Name Change**

1. If you are requesting a name change, check the “Name Change” box. An updated certificate will be mailed to you.
2. Enclose **one** of the following documents with your PDE 338 D form as proof of name change:
  - Copy of marriage certificate
  - Copy of Court Order attesting the name change
  - Notarized statement indicating both the old and the new name

**SECTION III: Duplicate Certificate**

1. If you are requesting a duplicate certificate, check the “Duplicate Certificate” box. A \$40.00 signed money order must be submitted with the application.
2. Print the subject area (Elementary, Secondary Guidance Counselor, etc.) of the certificate you wish duplicated, and indicate the year in which it was issued.
3. Print the name of colleges/universities attended, the state in which the institution is located for all institutions in which you earned a Bachelor’s degree, or higher. Enter the type of degree and the date the degree was awarded.

**SECTION IV: Background**

**Please note: Incorrectly answering the questions in this section may significantly delay the processing of your application.**

1. If you have answered “unfounded,” “founded” or “indicated” provide a current, original Child Abuse Clearance from the state, territory or country in which the investigation or report occurred, and a signed letter of explanation with your application. If you have never been the subject of a child abuse investigation or report, select the “no” box.
2. If you have answered “yes” a signed letter of explanation, as well as any public documentation pertaining to the disciplinary action must be submitted with this application.
3. If you have answered “yes” a signed letter of explanation, as well as any documentation pertaining to the disciplinary action, termination, investigation, or resignation, must be submitted with this application.
4. If you have answered “yes” a signed letter of explanation, as well as any public documentation pertaining to the disciplinary action must be submitted with this application.
5. If you have answered “yes” you will not be automatically prevented from obtaining a PA certificate. A certification denial based on insufficient credentials (such as lack of coursework or test scores) does *not* need to be acknowledged. Any documentation pertaining to the denial, revocation, suspension, surrender, or reprimand must be submitted with this application.
6. If you have answered “yes” please include the following in your application (A YES answer does not automatically prevent an applicant from obtaining a PA certificate):
  - a signed letter of explanation;
  - your resume;
  - certified court documents related to all criminal matters;
  - a current, original FBI Clearance or registration identification number;
  - a current, original PA Criminal Background Check;
  - a current, original PA Child Abuse Clearance;
  - five letters of reference (at least three must be professional references); and
  - a letter from your probation officer, if applicable.
7. If you have answered “yes” please attach the additional documentation as listed above.

## SECTION V: Affidavit

**Complete the Affidavit section by Signing and dating the application.** Your signature certifies that all of the information provided in the application is correct and true. Misrepresentation/falsification may result in professional discipline and the revocation of your Pennsylvania certificate.

### COMPLETING THE APPLICATION

The primary reason for delays in processing certification applications is missing or incomplete information on the PDE 338 D form and/or missing documentation. **If there is missing or incomplete information, and/or missing documentation, your application will not be processed and will be returned to you. All signatures and corresponding dates must be within one year of application submission.**

Before mailing, review the application and ensure:

- The information entered on the PDE 338 D form is complete and accurate (*ensure that you have enclosed both pages of the PDE 338 D form*)
- All required documentation is enclosed
- The PDE 338 D form has been signed and dated
- Enclose a \$40 signed. Money Order made payable to the Commonwealth of Pennsylvania with your application. The Bureau of School Leadership and Teacher Quality is unable to accept personal checks, cash or credit cards. **The non-refundable fee will be retained by the Commonwealth whether or not the transaction results in the issuance of a certificate.**

Mail the General Application-Form PDE 338 D, a U.S. money order and supporting documents to:

Bureau of School Leadership and Teacher Quality  
 Pennsylvania Department of Education  
 333 Market Street, 3<sup>rd</sup> Floor

Harrisburg, PA 17126-0333