

holders.

Institutional Verification Form

NDE 20-016 Revised 04-2024

Printed Name of Applicant		Social Security Number*	
To the applicant: The signature of appropriate section of this form. Thead of the education unit of ear To the Certification Officer: Compabove and verify with your signat	he certification office ch institution. Solete the appropriate	ege certification officer mus cer is a full-time staff membe	t appear on the er designated by the
Verification of a COMPLETED APPROVED PROGRAM			
The Above-Named applicant has completed the following at this			
institution: (Check all that apply)	Teaching		
Approved Program for Initial Certification	Grade Level(s)		
Bachelor's Degree		Grade Level(s)	
Master's Degree	Grade Level(s)		
Doctorate Degree	Administration Grade Level(s)		
	Grade Level(s)		
Fifth Year Program	Special Services (non-teaching)		
Specialist (6 th year program)	Grade Level(s)		
Program for Added Endorsement	Grade Level(s)		
Verification of RECENT COLLEGE CREDIT HOURS			
The above-named applicant the satisfaction of this institution At this institution Transferred to this institution in my professional opinion, the Teaching Certificate or an	has completed win the following sense semester hours continued tion semester hours verse college hours v	thin the immediate past to the thin the immediate past to the ster hours of college control of credit. The thin	ive (5) years and to redit:
Signature of Authorized Certification Officer		- <u> </u>	Date
Institution		City	State/Country

500 South 84th Street, 2nd Floor, PO Box 94987, Lincoln, NE 68509 Phone: 402-471-0739, Fax: 402-471-0117 Website: www.education.ne.gov/tcert, Email: nde.tcertweb@nebraska.gov

*The requirement that a certificate or permit applicant provide his/her social security number is contained in Neb. Rev. Stat. 79-810. The uses that will be made of this number are criminal background checks prior to issuance of a certificate and for purposes of data compilation and statistics concerning employment of graduates of state approved teacher education programs and employment of certificate or permit