



**Montana Application for Class 3 Administrative
License - Principal & Superintendent Endorsement(s)**

Requirements for Montana Class 3 Administrator—Principal Endorsement
1. Completion of an Administrative Principal preparation program which is accredited by NCATE, CAEP, or is a state approved program from a regionally accredited college or university. ARM 10.57.417
2. Completion and verification of a Master’s Degree in educational leadership or a Master’s Degree related to education. ARM 10.57.417
3. Verification of three years teaching experience as a licensed Teacher in a state accredited P-12 school setting. ARM 10.57.413
Requirements for Montana Class 3 Administrator—Superintendent Endorsement
1. Completion and verification of an Education Specialist, Master’s, or Doctoral degree in education or education leadership. ARM 10.57.414
2. Completion of an Administrative Superintendent preparation program which is accredited by NCATE, CAEP, or is a state approved program from a regionally accredited college or university. ARM 10.57.414
3. Completion of a minimum of 18 semester graduate credits in a school administrator preparation program, of which 12 must be beyond the Master’s degree in education.
4. Verification of three years teaching experience as a licensed Teacher in a state accredited P-12 school setting. ARM 10.57.413
5. Verification of licensure and endorsement as a Principal (P-12) in a state accredited P-12 school setting. ARM 10.57.414
6. Verification of minimum of one year of administrative experience as an appropriately licensed Principal in a state accredited P-12 school setting. ARM 10.57.414
Important Considerations:
<ul style="list-style-type: none"> • Montana DOES NOT have reciprocity with any other state in regards to administrative licensure. Therefore even though you may have been a licensed educator or administrator in another state, if you do not meet the all of requirements above, you will not qualify for Class 3 Educator licensure in Montana. • You MUST qualify for a Montana teaching license to be considered eligible for an administrative license in Montana. Please review the requirements for teacher’s licensure on our website at http://opi.mt.gov/cert . • If you completed an alternative educator preparation program in another state, your program may not meet the requirements for licensure in Montana and therefore you may not qualify for Class 3 licensure. Your educator preparation program’s accreditation status must be verified on a University Recommendation form and submitted for review. • To qualify for a Class 3 license with a Principal endorsement you must have completed 3 semester credits of coursework in Montana School Law. If you have not completed this coursework you can apply for the Class 5 provisional license which will give you 3 years to complete the coursework while working as a Principal. Please indicate on the application if you are applying for your provisional license. • To qualify for a Class 3 license with a Superintendent endorsement you must have completed 3 semester credits of coursework in each of the following: Montana school law; Montana school finance; and Montana collective bargaining and employment law. If you have not completed this coursework you can apply for the Class 5 provisional license which will give you up to 3 years to complete the coursework while working as a superintendent. Please indicate on the application if you are applying for your provisional license. • For questions regarding these considerations please call us at 406-444-3150

Montana Application for Class 3 Administrative License - Principal & Superintendent Endorsement(s)

Montana Educator Licensure Application Checklist	Completed
I have completed all sections of the application and indicated the endorsement/endorsements I am applying for.	
I have enclosed a check or money order payable to Montana OPI for \$30 per license applied for and a one-time filing fee of \$6. (\$36 for one initial license, \$66 if applying for two licenses. Example: Class 1 and Class 3 both) CASH PAYMENTS WILL NOT BE ACCEPTED.	
I have enclosed an official transcript or requested official transcripts be sent to the Montana OPI from all institutions I have attended. NO PHOTOCOPIES, SCANNED COPIES, or EMAILED IMAGES will be accepted from the applicant.	
I have signed and dated the bottom of the Character and Fitness Information page. (page 6)	
I have recited the oath in the presence of a licensed notary and signed the notary page. (page 7)	
I have submitted a fingerprint background check to be processed by the Montana Department of Justice. DO NOT SEND THE FINGERPRINT CARD TO THE OFFICE OF PUBLIC INSTRUCTION (page 12)	
I have included a copy of my valid out of state teaching and/ or administrative license. (If applicable)	
I have completed the top section of the Verification of Teaching Experience form (attachment 1) and sent it to my employers. Required for both endorsements. I am submitting this form with my application. NO PHOTOCOPIES, SCANNED COPIES, or EMAILED IMAGES will be accepted from the applicant.	
I have completed the top sections of the University Recommendation form (attachment 2) and sent it to the institution where I completed my administrative principal's program to be filled out. I am submitting the ORIGINAL completed form with my application. NO PHOTOCOPIES, SCANNED COPIES, or EMAILED IMAGES will be accepted.	
I have completed the top sections of the University Recommendation form (attachment 3) and sent it to the institution where I completed my administrative superintendent's program to be filled out. For Superintendent Applicants Only. I am submitting the ORIGINAL completed form with my application. NO PHOTOCOPIES, SCANNED COPIES, or EMAILED IMAGES will be accepted.	
I have completed the top section of the Verification of Administrative Experience form (attachment 4) and sent it to my employers. For Superintendent Applicants Only. I am submitting this form with my application. NO PHOTOCOPIES, SCANNED COPIES, or EMAILED IMAGES will be accepted from the applicant.	
Important: Applications will not be processed until all required documentation/information has been received. It is your responsibility to check with our office to ensure that all materials have been received. You can review your application at https://apps3.opi.mt.gov/SSO/Login/Login.aspx	All documents must be mailed to: Montana Office of Public Instruction Attn. Educator Licensure PO Box 202501 Helena, MT 59620
If you are only applying for an Administrative license to be endorsed as a Principal, disregard attachments 3 and 4	

**Montana Application for Class 3 Administrative
License - Principal & Superintendent Endorsement(s)**

Please complete all sections of this application. Incomplete applications will not be evaluated. For questions regarding the application process please refer to our website at www.opi.mt.gov/cert .

Last Name:		First Name:		Middle Initial:
Address:			Apartment/Unit #	
City:	State:	Zip Code:	Former Name(s)	
Phone Number:		Email Address:		
Last Four Digits of Your SSN:		Date of birth:	Gender <input type="radio"/> Male <input type="radio"/> Female	
Race (Choose one or more): <input type="radio"/> American Indian/ Alaska Native <input type="radio"/> Black/African American <input type="radio"/> Asian <input type="radio"/> Native Hawaiian/Pacific Islander <input type="radio"/> White			Ethnicity: <input type="radio"/> Hispanic <input type="radio"/> Non-Hispanic	
School year initial licensure to be active July 1, _____				
Have you ever held a Montana Educator License?	<input type="radio"/> Yes <input type="radio"/> No	If so, please indicate under what name.		
Have you ever held an educator license from another state?	<input type="radio"/> Yes <input type="radio"/> No	If so, please indicate what state/states.		

Academic and Education Experience

Class 3 Administrative Principal licensure requires that all applicants MUST have completed a Master's degree in Educational Leadership from an accredited professional educator preparation program or a Master's degree related to education and an accredited educator preparation program for K-12 Principals; Original paper or electronic ("escript") transcripts must be submitted for all colleges or universities attended. Electronic transcripts must be sent from the college or an official transcript clearinghouse. We will not accept electronic or scanned transcripts directly from the applicant

Name of College or University	City/State	Degree earned	Major		Minor	
Transcripts requested/enclosed <input type="radio"/>		<input type="radio"/> Bachelors <input type="radio"/> Masters <input type="radio"/> Other <input type="radio"/> None				
			Educator Preparation Program?	<input type="radio"/> Yes <input type="radio"/> No	Educational Leadership Program?	<input type="radio"/> Yes <input type="radio"/> No
Transcripts requested/enclosed <input type="radio"/>		<input type="radio"/> Bachelors <input type="radio"/> Masters <input type="radio"/> Other <input type="radio"/> None				
			Educator Preparation Program?	<input type="radio"/> Yes <input type="radio"/> No	Educational Leadership Program?	<input type="radio"/> Yes <input type="radio"/> No
Transcripts requested/enclosed <input type="radio"/>		<input type="radio"/> Bachelors <input type="radio"/> Masters <input type="radio"/> Other <input type="radio"/> None				
			Educator Preparation Program?	<input type="radio"/> Yes <input type="radio"/> No	Educational Leadership Program?	<input type="radio"/> Yes <input type="radio"/> No
Transcripts requested/enclosed <input type="radio"/>		<input type="radio"/> Bachelors <input type="radio"/> Masters <input type="radio"/> Other <input type="radio"/> None				
			Educator Preparation Program?	<input type="radio"/> Yes <input type="radio"/> No	Educational Leadership Program?	<input type="radio"/> Yes <input type="radio"/> No



Montana Application for Class 3 Administrative
License - Principal & Superintendent Endorsement(s)

PRINCIPAL ENDORSEMENT	
Verification of Completion of Montana School Law Coursework	
Please check one of the options below.	
	Check one
I have completed the required 3 semester credits of coursework in Montana School Law and meet the requirements for a Class 3 administrative license with a Principal endorsement. I am applying for a Class 3 License (full licensure).	
I have NOT completed the required 3 semester credits of coursework in Montana School Law or I do not qualify for full licensure as an administrator at this time. Therefore I am applying for a Class 5 Provisional License. I understand that if I am granted a Class 5 provisional license I will have three years from the validation date of the license to complete the required coursework while working as a Principal. Upon completion of the required coursework I may apply to have my Class 5 license upgraded to a Class 3 license for full licensure.	

SUPERINTENDENT ENDORSEMENT	
Verification of Completion of Montana School Law, Montana School Finance and Montana Collective Bargaining and Employment Law coursework	
Please check one of the options below.	
	Check one
I have completed the required 3 semester credits of coursework in each of the following: Montana School Law, Montana School Finance, Montana Collective Bargaining and Employment Law and meet the requirements for a Class 3 administrative license with a Superintendent endorsement. I am applying for a Class 3 License (full licensure).	
I have NOT completed the required 3 semester credits of coursework in each of the following: Montana School Law, Montana School Finance, Montana Collective Bargaining and Employment Law or I do not qualify for full licensure as an administrator at this time. Therefore I am applying for a Class 5 Provisional License. I understand that if I am granted a Class 5 provisional license I will have up to three years from the validation date of the license to complete the required coursework while working as a Superintendent. Upon completion of the required coursework I may apply to have my Class 5 license upgraded to a Class 3 license for full licensure.	

Experience as a Professional Educator

Class 3 Administrative Principal licensure requires verification of at least 3 years of professional teaching experience as an appropriately licensed and endorsed teacher.

A verification of teaching experience form must be submitted to document work experience.

NO PHOTOCOPIES, SCANNED COPIES, or EMAILED IMAGES will be accepted.

(See attachment 1 of this application)

Name of School	City/State	Dates Employed	Assignment	Grade level
			<input type="radio"/> Teacher <input type="radio"/> Administrator <input type="radio"/> Other _____	
			<input type="radio"/> Teacher <input type="radio"/> Administrator <input type="radio"/> Other _____	
			<input type="radio"/> Teacher <input type="radio"/> Administrator <input type="radio"/> Other _____	

Experience as a Licensed Administrator

Class 3 Administrative Superintendent licensure requires verification of at least 3 years of professional teaching experience as an appropriately licensed and endorsed teacher.

In addition, at least 1 year of professional administrative experience as an appropriately licensed and endorsed principal. **A verification of teaching/administrative experience forms must be submitted to document work experience. NO PHOTOCOPIES, SCANNED COPIES, or**

EMAILED IMAGES will be accepted.

(See attachment 1 and 4 of this application)

Name of School	City/State	Dates Employed	Assignment	Grade level
			<input type="radio"/> Teacher <input type="radio"/> Administrator <input type="radio"/> Other _____	
			<input type="radio"/> Teacher <input type="radio"/> Administrator <input type="radio"/> Other _____	
			<input type="radio"/> Teacher <input type="radio"/> Administrator <input type="radio"/> Other _____	
			<input type="radio"/> Teacher <input type="radio"/> Administrator <input type="radio"/> Other _____	



Montana Application for Class 3 Administrative License - Principal & Superintendent Endorsement(s)

Character and Fitness Information (answer ALL questions to avoid delays)

Last Name		First Name		MI
1. Do you currently hold or have you ever held a professional certificate, license, or other credential in ANY field (e.g. education, cosmetology, social work, outfitting, acupuncture) in Montana or any other state? If yes, please provide the following information for every certificate, license, or credential				<input type="radio"/> Yes <input type="radio"/> No
State or Jurisdiction	Type of License	Certificate or License Number		
2. Have you ever had adverse action taken against any professional certificate, license, or other credential issued for practice in ANY field, or is any such action pending? If yes, select the actions below and explain on a separate sheet, providing dates, locations, circumstances, and outcome for each incident. Sign and date each page.				<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Previously Disclosed
<input type="radio"/> Letter of Warning	<input type="radio"/> Suspension	<input type="radio"/> Voluntary Surrender	<input type="radio"/> Failure to Renew	<input type="radio"/> Other (please describe)
<input type="radio"/> Reprimand	<input type="radio"/> Denial	<input type="radio"/> Revocation	<input type="radio"/> Cancellation	
3. Have you ever resigned or been disciplined, discharged, or asked to resign or retire from a professional position or military service because of allegations of misconduct, or is any such action pending? This includes discipline for failure or refusal to fulfill an employment contract. If yes, explain on a separate sheet, providing dates, locations, and circumstances for each incident. Sign and date each page.				<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Previously Disclosed
4a. Have you ever been convicted of any crime (misdemeanor or felony)? If yes, explain on a separate sheet, providing dates, locations, and circumstances for each incident. Sign and date each page. *Most arrests and convictions show up on a background check even if purged or dismissed by a court.				<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Previously Disclosed
4b. Have you entered into a pretrial diversion* for any crime? If yes, select from the options below and explain on a separate sheet, providing dates, locations, and circumstances for each incident. Sign and date each page. <i>*A pretrial diversion program is any program that results in dismissal of charges upon satisfaction of conditions such as paying restitution or fines, having no similar offenses for a specified time, performing community service, completing rehabilitation or treatment programs, satisfying probation, etc. Answer "yes" even if you were not required to complete the program.</i>				<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Previously Disclosed
<input type="radio"/> Deferred Prosecution		<input type="radio"/> Deferred or Suspended Imposition of Sentence		<input type="radio"/> Deferred Adjudication
<input type="radio"/> Stay of Adjudication		<input type="radio"/> First Time Offenders Programs		<input type="radio"/> Other Programs (Please describe)
<small>Taxpayer Identification Number (TIN), Social Security Number (SSN) or Canadian identification number (GST): Section 7 of Public Law 93-579 requires us to advise you of the following in connection with our request for your Taxpayer Identification Number (TIN): Disclosure of your taxpayer identification number is mandatory pursuant to the National Child Protection Act of 1993, 42 USC 5119a and c, which authorizes a state and national criminal history background check to determine the fitness of an employee, volunteer, or other person with unsupervised access to children, the elderly, or individuals with disabilities. Your taxpayer identification number will also be used for verification purposes in connection with college transcripts and other education records pertaining to your application for teacher licensure.</small>				
Taxpayer ID Number, Social Security Number or Canadian ID				
<i>By signing this application, I acknowledge I have read and understood the foregoing. I declare under penalty of perjury the information included in or with my application is true, correct, and complete to the best of my knowledge. I am aware false statements of material fact, misrepresentations, or omissions of material fact in or with this application is grounds for the denial, revocation, or suspension of the license(s) I am seeking.</i>				
Signature:			Date:	
Note: Your application will not be processed until we receive your fingerprint background check results. Have you submitted your background check to the Montana Dept. of Justice? (See instructions on Page 8)			<input type="radio"/> Yes <input type="radio"/> No	

Professional Educators of Montana Code of Ethics

Professional educators recognize and accept their responsibility to create learning environments to help all students reach their full potential. They understand the trust and confidence placed in them by students, families, colleagues, and the community. To achieve their professional purpose, educators strive to maintain the highest ethical standards. The Professional Educators of Montana Code of Ethics sets out these fundamental principles which guide their behavior.

Principle I. Commitment to Students and Families. The ethical educator:

- A. Makes the well-being of students the foundation of all decisions and actions.
- B. Promotes a spirit of inquiry, creativity, and high expectations.
- C. Assures just and equitable treatment of every student.
- D. Protects students when their learning or well-being is threatened by the unsafe, incompetent, unethical or illegal practice of any person.
- E. Keeps information confidential that has been obtained in the course of professional service, unless disclosure serves a compelling purpose in the best interest of students, or is required by law.
- F. Respects the roles, responsibilities and rights, of students, parents and guardians.
- G. Maintains appropriate educator-student relationship boundaries in all respects, including speech, print, and digital communications.

Principle II. Commitment to the Profession. The ethical educator:

- A. Fulfills professional obligations with diligence and integrity.
- B. Demonstrates continued professional growth, collaboration and accountability.
- C. Respects the roles, responsibilities, and rights of colleagues, support personnel, and supervisors.
- D. Contributes to the development of the profession's body of knowledge.
- E. Manages information, including data, with honesty.
- F. Teaches without distortion, bias, or prejudice.
- G. Represents professional qualifications accurately.

Principle III. Commitment to the Community. The ethical educator:

- A. Models the principles of citizenship in a democratic society.
- B. Understands and respects diversity.
- C. Protects the civil and human rights of students and colleagues.
- D. Assumes responsibility for personal actions.
- E. Demonstrates good stewardship of public resources.
- F. Exemplifies a positive, active role in school-community relations.
- G. Adheres to the terms of contracts, district policies and procedures, and relevant statutes and regulations.

Adopted by the Certification Standards and Practices Advisory Council July 13, 2016

**Montana Educator Licensure
Notary Page**

You must subscribe to the following oath or affirmation before a notary public or other officer authorized by law to administer oaths. (MCA §20-4-104.) "I solemnly swear (or affirm) that I will support The Constitution of the United States of America and The Constitution of the State of Montana."

Declaration

I hereby declare under penalty of perjury the information included in or with my application is true, correct, and complete to the best of my knowledge. In signing this application, I am aware that a false statement of material fact, misrepresentations, or omissions of material fact in or with this application may lead to the denial, revocation or suspension of the license(s) I am seeking. I acknowledge that I have read the Professional Educators of Montana Code of Ethics as provided on the Montana OPI Educator Licensure website.

Name of applicant: (Please print legibly)			
Date of Birth		Last 4 numbers of SSN	

Signature of Applicant: _____

This above oath was sworn and the document was signed before me on the _____ day
of _____, 20____
(Month) (Year)

By _____
(Print name of signer)

Signature of Notary: _____

Printed Name of Notary: _____

Residing in the State of: _____ County of: _____

Commission Expires: _____



Attachment 1:

Verification of Teaching Experience for Class 3 Administrator
(Principal &/or Superintendent)

<p>This statement MUST be prepared and signed by the appropriate school official based on personnel records. You may need to send this form to more than one district if your experience was earned in multiple schools.</p>					
<p>Applicant Information:</p>					
Last Name		First Name		MI	
Last Four Digits of SSN		Former Name(s)			
<p>To be completed by the School District. If the employment history is too complex to enter below, please sign this form and attach additional documentation. Please mail this form to the applicant above. NO PHOTOCOPIES, SCANNED COPIES, or EMAILED IMAGES will be accepted.</p>					
School Officials Name and Title:					
School District:					
School District City/State					
Does your School hold State Accreditation?			<input type="radio"/> Yes <input type="radio"/> No		
Was the licensure candidate above employed as <u>TEACHER</u> in your school?			<input type="radio"/> Yes <input type="radio"/> No		
Employed from (month/year) to (month/year)					
Full time	<input type="radio"/> Yes <input type="radio"/> No	Part time	<input type="radio"/> Yes <input type="radio"/> No	If Yes, FTE Equivalent? (eg .25 for ¼ time)	
Educational area the applicant was assigned to teach during employment at your school:	<input type="radio"/> Pre K <input type="radio"/> Elementary (K-8) <input type="radio"/> Middle School (4-8) Classes Taught _____ <input type="radio"/> Secondary (5-12) Classes Taught _____ <input type="radio"/> Special Education <input type="radio"/> School Counselor <input type="radio"/> Other: Please describe _____				
<p>I verify that the work experience information as documented on this form is correct to the best of my knowledge.</p>					
Signature					
Printed Name & Title					
Date		Email Address		Phone Number	



Montana Application for Class 3 Administrative
License - Principal & Superintendent Endorsement(s)

Attachment 2:

University Recommendation for Administrative Principal Endorsement

Candidate Information:					
Last Name:		First Name:		Middle Initial:	
Address:		City:		State:	Zip Code:
Last Four Digits of SSN		Birth Date		Former Name(s)	
To be completed by the college or university where the applicant completed your Administrative Principal preparation program. Please complete the information requested below and return form to applicant above. NO PHOTOCOPIES, SCANNED COPIES, or EMAILED IMAGES will be accepted.					
Name of College/University and location:					
Is your institution regionally accredited?		<input type="radio"/> Yes <input type="radio"/> No		Name of regional agency:	
Accreditation of Administrative Principal Preparation Program		<input type="radio"/> CAEP <input type="radio"/> NCATE <input type="radio"/> State Approved Program <input type="radio"/> Other i.e. Alternative route. (please describe) _____			
Type of Administrative Preparation Program completed	<input type="radio"/> Elementary Principal		<input type="radio"/> Secondary Principal		<input type="radio"/> K-12 Principal
Type of Master's Degree			<input type="radio"/> Educational Leadership <input type="radio"/> Master's Degree related to Education (please describe) _____		
To qualify for a full license endorsed as an Administrative Principal, Montana requires the following course: Montana School Law			Does the program the candidate completed contain the required Montana School Law coursework? <input type="radio"/> Yes <input type="radio"/> No		
I attest that the above named candidate <u>has completed</u> an administrator's preparation program. The program completed leads to licensure as a PRINCIPAL in the state of _____.					
Signature				Phone Number:	
Printed Name & Title				College Seal	
Date		Email Address			



Attachment 3:

University Recommendation for Administrative Superintendent Endorsement

Candidate Information:				
Last Name:		First Name:		Middle Initial:
Address:		City:		State: Zip Code:
Last Four Digits of SSN	Birth Date		Former Name(s)	
To be completed by the college or university where the applicant completed your Administrative Principal preparation program. Please complete the information requested below and return form to applicant above. NO PHOTOCOPIES, SCANNED COPIES, or EMAILED IMAGES will be accepted.				
Name of College/University and location:				
Is your institution regionally accredited?		<input type="radio"/> Yes <input type="radio"/> No		Name of regional agency:
Accreditation of Administrative Superintendent Preparation Program		<input type="radio"/> CAEP <input type="radio"/> NCATE <input type="radio"/> State Approved Program <input type="radio"/> Other i.e. Alternative route. (please describe) _____		
Type of Degree	<input type="radio"/> Doctoral <input type="radio"/> Education Specialist <input type="radio"/> Master's Degree in Education Leadership <input type="radio"/> Master's Degree in Education			
To qualify for the Administrative Superintendent endorsement, Montana requires a minimum of 18 semester graduate credits in a school administrator preparation program				
<input type="radio"/> The university program meets this requirement <input type="radio"/> The university program does not meet this requirement				
12 semester credits must be beyond the master's degree in education leadership, please identify the courses that meet this requirement.				
Course Number	Course Title			
To qualify for a full license endorsed as Administrative Superintendent, Montana requires the following courses:			Does the program the candidate completed contain the required coursework listed?	
<input type="radio"/> Montana School Law <input type="radio"/> Montana School Finance <input type="radio"/> Montana Collective Bargaining and Employment Law			<input type="radio"/> Yes <input type="radio"/> No	
I attest that the above named candidate <i>has completed</i> an administrative Superintendent preparation program. The program completed leads to licensure as a SUPERINTENDENT in the state of _____.				
Signature			Phone Number:	
Printed Name & Title			College Seal	
Date	Email Address			



Attachment 4:

Verification of Administrative Principal Experience for Class 3 Superintendent

<p>This statement must be prepared and signed by the appropriate school official. The current appropriate administrator may sign this form based on personnel records. You may need to send this form to more than one district.</p>							
Applicant Information:							
Last Name		First Name			MI		
Address	City			State	Zip Code		
Last Four Digits of SSN		Former Name(s)					
<p>To be completed by the School District. If the employment history is too complex to enter below, please sign this form and attach additional documentation. Please return this form to the applicant at the address above.</p>							
School Officials Name:							
School District:							
School District City/State							
Was the licensure applicant above employed as a licensed and appropriately assigned principal in your school?				<input type="radio"/> Yes <input type="radio"/> No			
Employed from (month/year)				To (month/year)			
Full time		<input type="radio"/> Yes <input type="radio"/> No	Part time	<input type="radio"/> Yes <input type="radio"/> No	If Yes, FTE Equivalent? (eg .25 for ¼ time)		
Educational Area		<input type="radio"/> Elementary Principal (K-8) <input type="radio"/> Secondary Principal (5-12) <input type="radio"/> K-12 Principal					
<p>I verify that the work experience information as documented on this form is correct to the best of my knowledge.</p>							
Signature		Printed Name & Title					
Date	Email Address		Phone Number				



How to Initiate your Fingerprint Background Check

1. Go to your local law enforcement agency or any other agency offering fingerprinting services. Request that your fingerprints be taken for a background check. There may be a charge for this service. **Fingerprints must be clear. Smudged or unclear prints will be rejected. Therefore we recommend that you complete two fingerprint cards to ensure that your background check can be completed in a timely manner.**
2. Fill out all sections of the fingerprint cards with your personal information as needed. **Do not fold the completed fingerprint cards.**

3. Complete the following sections as instructed below:
Employer and Address: Montana Office of Public Instruction
Educator Licensure Division
PO Box 202501
Helena, MT 59620-2501

Reason Fingerprinted: Montana Educator Licensure
ARM 10.57.201A

ORI: MT025025Y
DOJ-ST ID BUR
Helena, MT

4. **Mail the completed fingerprint cards along with a Check for \$27.25 payable to the Montana Department Of Justice to the following address:**
Montana Department of Justice
PO Box 201403
Helena, MT 59620-1403

DO NOT MAIL YOUR FINGERPRINT CARDS TO THE OFFICE OF PUBLIC INSTRUCTION

If you do, the cards will be returned to you and your application for licensure will be delayed. The fingerprint cards must be sent to the Montana Department of Justice at the address above.

5. **You will need to complete a separate fingerprint based background report for both OPI and your school.** OPI cannot share the results with your school and your school cannot share the results with OPI.
For questions regarding the status of your background check call 406-444-3150. We will notify you by letter of rejected fingerprints and provide instructions on how to complete the process again.