



Archdiocese of Miami Office of Catholic Schools Certification Plan

School: _____

Name of Teacher: _____

Teaching Assignment: _____

Degree (BA/MA/PhD/EdD): _____ Field of Degree: _____

Certification Status with **Florida Department of Education**: _____

Statement of Eligibility: Eligible (SOE) _____ Not Eligible (SOI) _____
Expiration Date Expiration Date

Attach copy of latest FDOE evaluation letter **OR** Statement of Status of Eligibility (SOE)

All SOE requirements are to be completed by February 1 of the expiration year of the temporary certificate

STEP #	ACTION	DEADLINE DATE
1	Pass all four General Knowledge exams (English, Essay, Reading and Math) within one calendar year of the date of employment if required on the SOE	
2	(PECD) Complete (PMP) Professional Mentoring Program if required on the SOE	
3	Pass the SAE (subject area exam) if required on the SOE	
4	Pass the Professional Education Test if required on the SOE	
5	Complete all education coursework stated on the SOE	
6	Submit CG-10 Application at https://flcertify.fldoe.org/datamart/mainMenu.do for Professional Certification	

If the above actions are not completed by the deadline dates above, a contract cannot be signed for the following school year.

Principal Signature: _____

Teacher Signature: _____

Date: _____