

DUPLICATE SUBSTITUTE CREDENTIAL REQUEST

This form is only to be used to request the reprint of a substitute credential due to the loss of the original document previously issued in Gloucester County. Only one (1) reprint per credential can be accommodated. None of the applicant's personal information can be changed. In order for your reprint request to be processed, this form must be completed in its entirety. Incomplete forms will be returned. Concerned with the proliferation of identity theft, the department now requires submission of multiple forms of identification and a notarized statement of loss for those credentials that are no longer in your possession.

SUBSTITUTE CREDENTIAL TO BE REPRINTED

Please remember to enclose your personal check, certified check or money order for the amount of the \$60.00 made out to the "Commissioner of Education."

A. Basic Information Please print your name as it appears on your current credential.

Last Name First Name Middle Name or Initial

Street Address

City State Zip

Social Security Number Date of Birth: Month Day Year

Email address

B. Documentation Requirements: In this section, the applicant is required to submit *no less than three* types of identification including a mandatory photocopy of an individual's social security card. Clear and legible photocopies of these cards and papers should be attached to this form.

Submission of identification – Check boxes of those items for which you have attached copies.

Required COPY of Your Social Security Card -- A photocopy of the applicant's social security card *must* be submitted as one of three types of identification for the purpose of reprinting a substitute credential. For a replacement card please contact the Social Security Administration at 1-800-772-1213 or go to <http://www.ssa.gov/ssnumber> and click on Replacement Card. The remaining two items may be selected from the items listed below.

Also include COPIES of any two of the following items.

- Certificate of Birth (Raised Seal Copy)
- Valid Marriage License
- Valid New Jersey or Out-of-State Auto Operator License
- United States Passport (current or expired within 3 years)
- Adoption Papers
- Certificate of Citizenship
- Certificate of Naturalization
- Valid United States Military Photo ID Card
- Valid New Jersey Non-Driver Digital ID Card

D. Applicant's Signature (in ink)

Date

C. Notarized Statement of Loss & Substitute Credential Reprint Status

Where credentials previously issued to you are no longer in your possession (e.g., lost), please enter the information for each substitute credential below.

List of Previously Issued Credentials No Longer in Your Possession That You Wish Reprinted

Indicate Type of Substitute Credential (Teacher/School Nurse-Non-instructional/Career and Technical Education/Educational Interpreter)	Date Issued (mm/dd/yyyy)

D. Certification *Failure to complete these items will result in rejection of the candidate's application for substitute credential.*

Have you ever had a certificate revoked or suspended in this or any state?
If yes, enclose a statement indicating the action taken and provide the pertinent details.

Circle whichever applies
Yes No

Have you ever been convicted of a criminal offense in this or any other state
or any jurisdiction outside of the United States? If yes, enclose a statement
indicating the municipality where this occurred and provide the pertinent details.

Circle whichever applies
Yes No

NOTARY. Present this form to a notary public and have the following notarized. The notary will affix his/her raised seal stamp to this document. *DO NOT ATTACH OR ENCLOSE ORIGINAL DOCUMENTS.*

Applicant's Signature

Sworn to before me this _____ day of _____, 20_____

Notary Seal

Notary Signature

Date of Signature