



State of California  
Commission on Teacher  
Credentialing Certification Division

Contact: <https://educatortools.ctc.ca.gov/ContactUs>  
Website: [www.ctc.ca.gov](http://www.ctc.ca.gov)

**EMERGENCY PERMIT RENEWAL VERIFICATION FORM**  
**(CL-469 CLAD-BL)**  
**CROSSCULTURAL, LANGUAGE, AND ACADEMIC DEVELOPMENT (CLAD) PERMIT**  
**BILINGUAL AUTHORIZATION PERMIT**

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This form must be completed and submitted with each application packet for renewal as specified in Commission leaflet [CL-533o-CLAD-BL](#). The form must be accompanied by an online application submitted through the employing agency and the required [processing fees](#). The employing agency must have an annual Declaration of Need for Fully Qualified Educators ([form CL-500](#)) on file with the Commission.

Applicant's Name: \_\_\_\_\_

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

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**PART I - Employer's Verification of Orientation, Guidance and Assistance**

**Orientation to Teaching** (required for first renewal only)

I certify that the above-named individual, while serving on the emergency permit for the first time, was provided with orientation specific to the authorization on the permit, including an overview of curriculum, classroom instruction, and effective techniques of classroom management at the assigned level.

**Guidance and Assistance** (required for all renewals)

I certify that the above-named individual was assigned the experienced educator named below to guide and assist while serving on the emergency permit.

\_\_\_\_\_  
*Name of Experienced Educator*

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**Employing Agency Signature**

\_\_\_\_\_  
*Name of Authorized Signer*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Employing Agency*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*County of Employment*

## PART II - Verification of Completion of Course Work or Exams

***If the applicant is completing course work in an approved California Teachers of English Learners (CTEL) or Bilingual Authorization program:***

All of Part I (on page 1) must be completed by the employing agency. All sections of Part II below must be completed by the authorized person at a Commission-approved CTEL or Bilingual Authorization program; however, Section A below is only required with the first renewal by applicants electing the program option, verifying that an evaluation of remaining authorization/certificate requirements has been completed. There is no appeal available for this requirement not being completed. Sections B and C must be completed with every renewal. Return this original form to the applicant so it may be submitted with the renewal application packet.

***If the applicant is taking examinations to earn the English learner/CLAD Certificate or Bilingual Authorization:***

All of Part I (on page 1) and Sections B and C of Part II (on page 2) must be completed by the employing agency with every renewal. Include the original copy of this form in the renewal application packet.

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### SECTION A

Required for the first renewal only, for those completing a Commission-approved CTEL or Bilingual Authorization program. To be verified by the approved program sponsor.

Yes      No

An evaluation has been completed by this institution identifying requirements this applicant must complete to be eligible for the English learner/CLAD or Bilingual Authorization.

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### SECTION B

Select one - required for all renewals

- 1. The applicant has taken and passed two subtests of the CTEL or CSET: World Languages exam(s) (Verification by employing agency)*
  - 2. The applicant has completed six semester units (9 quarter units) of CTEL/Bilingual course work in a Commission-approved program (Verification by program sponsor)*
  - 3. The applicant has completed a combination of 3 semester units (4 quarter units) of CTEL/Bilingual course work in a Commission- approved program and passed one subtest of the CTEL or CSET: World Languages exam(s) (Verification by program sponsor)*
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### SECTION C

This signature block must be completed by the college or university if boxes 2 or 3 have been selected above. If box 1 has been selected, this signature block must be completed by the employing agency.

**Authorized Signature**

\_\_\_\_\_  
*Name of Authorized Signer*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*IHE/Employing Agency*

\_\_\_\_\_  
*Authorized Signature*

\_\_\_\_\_  
*Date*