APPLICATION FOR RENEWAL OF THE MICHIGAN PRELIMINARY SCHOOL PSYCHOLOGIST CERTIFICATE

Effective October 15, 2009, there is a $50.00 processing fee for this application. Please pay the fee online using a credit card, debit card, or checking account before submitting the application. Applications without fee payment cannot be processed.

APPLYING FOR A RENEWAL OF THE PRELIMINARY SCHOOL PSYCHOLOGIST CERTIFICATE IS A TWO-STEP PROCESS.

To apply, applicants must:

1. Submit materials required by the MSU Certification Office in a single packet to 620 Farm Lane, Room 134, East Lansing, MI 48824, and
2. Initiate an application with the Michigan Department of Education (MDE) using the Michigan Online Educator Certification System (MOECS).

These two steps can be completed in either order or concurrently; however, both steps must be completed before the certificate can be issued. Incomplete applications will not be reviewed. Instructions for both steps are below.

APPLICATION INSTRUCTIONS

I. Complete and submit the following materials in a single packet to the MSU Certification Office

- Application for Renewal of the Preliminary School Psychologist Certificate, completed, signed (in ink) and dated
- Conviction Disclosure Form, completed, signed (in ink) and dated
- Applicants with convictions must also submit a Register of Actions or Judgment of Sentence from the court in which they were convicted, or a letter from the MSU Certification Officer indicating that the conviction has already been reviewed.
- Clear copy of applicant's Preliminary School Psychologist Certificate
- Clear copy of applicant’s supervisor’s School Psychologist Certificate
- Evidence of legal name change, if applicable (driver’s license, social security, etc.)
- MSU Processing fee (paid online)

Questions about the School Psychologist program should be directed to Dr. Jana Aupperlee at aupperl3@msu.edu.

Please bring or mail your MSU information packet to:
MSU Certification Office
620 Farm Lane, Room 134
East Lansing, MI 48824
II. Register with MEIS and apply for certification using MOECS

The online MOECS application is automatically routed to the MSU Certification Office for review. MSU’s review cannot be completed until the required materials have been received. When MSU indicates its approval of the online application, MDE will notify the applicant by email and require online payment of a certification fee. Following payment, MDE will issue the certificate and mail it to the applicant.

Instructions for Initiating a Certification Application Using MOECS

**Step 1: Create a Michigan Education Information System (MEIS) Account**
Visit [https://cepi.state.mi.us/MEISPublic/](https://cepi.state.mi.us/MEISPublic/) and follow the links to create a Michigan Education Information System (MEIS) account. When you finish the MEIS registration process, you will see a screen with your account ID, login, and temporary password. Follow the link at the bottom of the screen to set your MEIS password. You must retain your MEIS account information for future reference.

**Step 2: Register with MOECS**
Once you have established a MEIS account, go to the MOECS website ([http://www.michigan.gov/moecs](http://www.michigan.gov/moecs)) and login with your MEIS user ID and password. Follow the steps to self register with MOECS. You will be asked to provide your MEIS account number, which is included in the email that you received from MEIS.

**Step 3: Apply for a Certificate using MOECS**
Once you have successfully logged into MOECS, you will be asked to provide demographic information. Once it has been saved, you will see links on the left navigation panel. Choose the link that is appropriate for you and follow the steps to apply for your certificate.

**Step 4: University/College review/approval**
After you have applied for the certificate, your application will be routed to MSU for review and approval.

**Step 5: Online Fee payment**
Once your MOECS application has been approved by MSU, you will receive an email from MDE with a link for online fee payment using a credit/debit card. Alternatively, you can log into MOECS using your user ID and password and click on the “pending payment” hyperlink on the home page.

**Step 6: Issuance of Certificate**
Once the fee has been paid, your application will be approved by the Michigan Department of Education, Office of Professional Preparation Services (OPPS), and the certificate will be printed and mailed within five business days to the address you provided in your application.

If you have difficulty with the registration process, please contact the MDE Office of Professional Preparation Services at 517/373-3310. Please visit [http://www.michigan.gov/moecs](http://www.michigan.gov/moecs) for more information on MOECS.

*MSU is an Affirmative Action/Equal Opportunity Institution*
Application for RENEWAL of the MICHIGAN PRELIMINARY SCHOOL PSYCHOLOGIST CERTIFICATE

GENERAL INFORMATION

Name: ____________________________

Last: ____________________________ First: ____________________________ M.I.: ____________________________ Other names of record: ____________________________

Address: ____________________________ Street: ____________________________ City: ____________________________ State: _______ Zip Code: _______

Social Security Number: ____________________________ PID/MSU Student #: ____________________________ Gender: ____________________________ U.S. Citizen: ____________________________

Preferred E-mail Address: ____________________________

RACIAL-ETHNIC CATEGORIES

___ American Indian or Alaskan Native ____________________________ Hispanic ____________________________

___ Asian or Pacific Islander ____________________________ White, not of Hispanic Origin ____________________________

___ Black, not Hispanic Origin ____________________________ I do not wish to respond ____________________________

CERTIFICATION STATUS

Michigan certificate(s) Held: ___ Preliminary School Psychologist ___ Other _____________________________

Date(s) Issued: ____________________________ Recommending Institution(s): ____________________________

ACADEMIC HISTORY

Indicate the number of credits (or degree) earned after issuance of the Preliminary School Psychologist Certificate.

Institution: ____________________________ Dates Attended: ____________________________ Credits (or Degree): ____________________________ Term/Semester: ____________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Are you currently enrolled? No ___ Yes ___ Number of Credits ___ Institution ____________________________

FIELD EXPERIENCE AS A SCHOOL PSYCHOLOGIST

Supervisor/Location: ____________________________ Dates: ____________________________ Total Number of Hours: ____________________________

________________________________________

Permission is given to Michigan State University to solicit information regarding teaching experience and to release pertinent data and transcripts for recommendation of teacher certification to the Michigan Department of Education. I understand that I will be charged a fee for my certificate, in accordance with Public Act 339 of 1988 and that I will be billed by MDE for the amount owed.

In accordance with Public Act 96 of 1995, it is a criminal offense to use or attempt to use, a college or university transcript that is fraudulently obtained, altered, or forged, or to use other fraudulent credentials to obtain a teacher, school administrator, school guidance counselor, or school psychologist certificate.

Signature: ____________________________ Date: ____________________________

DO NOT WRITE BELOW THIS LINE

Type of certificate recommended to MDE ____________________________

Approved by ____________________________ (Department)

Approved by ____________________________ (Certification Office)

Date forwarded to Registrar’s Office: ____________________________ Highest Degree Held: BA/BS MA/MS EDS PHD
The Michigan State Board of Education has authority under Part 10 Administrative Hearings of the Teacher Certification Code to deny, suspend or revoke a teaching certificate (R 390.1201). Students and certification candidates are asked to provide responses to critical questions prior to (1) admission to the teacher preparation program; (2) internship placement and/or (3) recommendation for initial certification, renewal of Standard, and Professional certification. An applicant who has been convicted of a felony or misdemeanor may be denied admission, field placement, or recommendation for certification. An applicant who has been convicted of a felony or misdemeanor at any point during his or her academic program may, upon request, be granted a hearing prior to a final decision regarding admission, field placement, or recommendation for certification. Such a hearing will be referred to the College of Education Hearing Board for review and recommendation.

Please answer each question by checking “Yes” or “No”. If you answer “Yes” to any question, please provide complete information on next page.

A. Have you ever accepted responsibility for a civil infraction (excluding speeding tickets) or been convicted of (or pled no contest to) a misdemeanor or felony? ___ Yes ___ No

B. Do you currently have charges pending against you? ___ Yes ___ No

   If you answered yes to Question A or B, you must provide a Register of Actions or Judgment of Sentence for the conviction from the court in which you were convicted, admitted responsibility, or pleaded no contest.

C. Have you had a teaching, school counselor, school psychologist, or school administrator certificate suspended or revoked? ___ Yes ___ No

D. Is there currently action pending against your teaching, school counselor, school psychologist, or school administrator certificate? ___ Yes ___ No

E. Have you ever surrendered a teaching, school counselor, school psychologist, or school administrator certificate? ___ Yes ___ No

F. Has this conviction/infraction previously been disclosed to the MSU Certification Office? ___ Yes ___ No
If you answered yes to question A, please answer the following questions for each conviction. (Attach a separate page, if necessary.)

a) What was the offense?___________________________________

Fully explain the circumstances. (Attach an additional page, if necessary.)

_________________________________________________________________________________

_________________________________________________________________________________

b) What was the date of your conviction? _______________________

c) In what city, state, and country did this occur?__________________________

d) In what court? ______________________________________________________________________

e) Please provide any other facts that you consider relevant to this circumstance:

_________________________________________________________________________________

_________________________________________________________________________________

If you answered yes to any other question, please note the item to which you are responding and fully describe the nature of the issue. (Attach an additional sheet, if necessary.)

_________________________________________________________________________________

_________________________________________________________________________________

RELEASE:

I declare and affirm, under penalty of committing fraud in the application process, that all the statements made in the foregoing application, including its accompanying statement or form, are true, complete and correct. I further declare and affirm that any conviction that occurs subsequent to the date of this application but prior to the issuance of any certificate will be reported, in writing, to the Certification Officer, Michigan State University, 620 Farm Lane, Room 134, East Lansing, MI 48824.

By signing this form, I consent to the release of information to Michigan State University for the purpose of ascertaining my moral character and to the State of Michigan, Office of Professional Personnel Services, as necessary.

DATE

_______________________

STUDENT #:

_______________________

SIGNATURE

________________________________________

NAME (Print)

________________________________________

ADDRESS

________________________________________

E-MAIL

________________________________________

TELEPHONE

________________________________________

9/12/2019