

Program Sponsor Variable Term Waiver Request Form

Upon receipt of your request, a Credential Analyst will process your paperwork, making sure everything is in order.

Important: Please enter your name and email address as listed on your CTC Educator profile. You can check your profile at www.ctc.ca.gov

Personal Information

First name

Middle name

Last name

Former last name

(if applicable)

CSUN ID

Semester you are completing or completed
program

Email Address listed on your CTC Educator Profile

Phone Number

Credential Information

Select the credential program you are completing or completed

Preliminary Multiple Subject

Preliminary Single Subject

Preliminary Education Specialist

Dual Preliminary Single Subject/Education Specialist

Clear Pupil Personnel Services

Please select requirements you have not met (check all that apply)

Basic Skills (CBEST)

Subject Matter (CSET) (not required for services credential)

edTPA (not required for services credential)

RICA (not required for services credential)

Other: _____

Acknowledgment

I understand that with the submission of this application, I am being recommended for the Program Sponsor-Variable Term Waiver (valid for one year) and once I have completed all the requirements, I will need to submit a Credential Request online for recommendation of the preliminary credential.

I understand that I will have to meet all missing requirements prior to the expiration of the PS-VTW and that I will need to be continually enrolled in A/R 602 for the duration of the PS-VTW. I understand a PS-VTW does not guarantee hiring districts will accept it for employment.

Candidate Signature: _____ Date: _____