



## Commission on Teacher Credentialing

1900 Capitol Avenue Sacramento, CA 95811 (916) 322-4974 Fax (916) 323-6735 www.ctc.ca.gov

Division of Professional Practices

### NOTIFICATION OF CREDENTIAL HOLDER'S CHANGE IN EMPLOYMENT STATUS DUE TO ALLEGATIONS OF MISCONDUCT (CALIFORNIA CODE OF REGULATIONS, TITLE 5 SECTION 80303)

#### SECTION 1:

Name of Credential Holder: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Last Four of SSN: \_\_\_\_\_ Incident Date(s): \_\_\_\_\_

Employment Start Date: \_\_\_\_\_ Employment End Date: \_\_\_\_\_ Date of Final Action: \_\_\_\_\_

Final Disciplinary Action: \_\_\_\_\_ Board Approval Date: \_\_\_\_\_

Current Address: \_\_\_\_\_

Position, Title, School Site: \_\_\_\_\_

Employing School District: \_\_\_\_\_ COE: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Contact Number: \_\_\_\_\_

#### SECTION 2:

*Please attach all of the following documents pursuant to Section 80303(b) - if applicable:*

- Notification Form
- Cover Letter (Summary of Case)
- Notice of Intent to Dismiss/Suspend
- Statement of Charges/Accusation
- Request for a CPC Hearing and Hearing Dates
- Final Decision (District/CPC)
- Letter of Resignation or Retirement
- Board's Acceptance
- Settlement/General Release Statement
- Copy of Signed Contract
- District Investigation Report(s)
- Law Enforcement Report(s) Police/Court
- Other \_\_\_\_\_

\*NOTE: Parent permission is obtained prior to interviewing students.

- Written Statement(s) of:  
Victim(s)  
Witness(es)  
Parent/Guardian(s)

- Contact Information\*  
Name, Address, Phone Number of:  
Victim(s)  
Witness(es)  
Parent/Guardian(s)

#### SECTION 3:

*All Other Relevant Documents:*

- Copies of Emails/Text Messages
- Computer Printouts (Hard Copy)
- Correspondence with Employee
- Photographs
- Video Evidence
- Copies of Facebook, Instagram, etc.
- Other \_\_\_\_\_

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If you have any questions, Rosalinda Lara can be reached at the above email address or by calling (916) 322-8343.