SUPPLEMENT CIT

DECLARATION OF CITIZENSHIP OR NATIONAL STATUS OF APPLICANT FOR EDUCATOR CERTIFICATION

TYPE OR PRINT LEGIBLY, USING BLACK INK, WHEN COMPLETING THIS FORM.					
Applicant:					
Social Security Number:		Date of Birth	MM	DD	YYY
Phone Number:	E-mail:				
Choose one as appropriate:					

Name Social Security Number:

Proof of United States Citizenship Documentation List

Chart A