



Special Education Paraprofessional Application

COMPLETE & SUBMIT TO: Oklahoma State Department of Education, Special Education Services,
2500 North Lincoln, Suite 412, Oklahoma City, Oklahoma 73105 *Attention: Paraprofessional*

(Please Print Clearly)

(Mr./Miss/ or Mrs.) please circle: Complete Birthdate: _____

Name: _____

HOME ADDRESS: _____

CITY: _____ ZIP: _____ CELL #: _____

SCHOOL DISTRICT: _____ CAREER TECH: _____

To Be Filled Out By State Department of Education

Certificate of Completion ODCTE	Yes	No
Documentation Sheet	Yes	No
CPR Training	Yes	No
First Aid Training	Yes	No
District Job Description	Yes	No
Daily Schedule	Yes	No

Special Education Paraprofessional Certification Date _____

Signature/Date
 Approved

Signature/Date
Return Application

SPECIAL EDUCATION

Special Education Paraprofessional Documentation Sheet

Signature of Principal, Special Education Director, or Superintendent is REQUIRED for Verifying the Following Information.

- Received a copy of emergency procedures for the classroom or school
- Received a district handbook or policy manual for employees for your district
- Received Universal Precautions Training
- Meets the High School Diploma or General Education Development (GED) requirement for Paraprofessional Registry Status
- Daily Schedule & Job Description

Signature

Title

Date

(Principal, Special Education Director, or Superintendent SIGNATURE ONLY)

ATTACH THE FOLLOWING:

1. A copy of the certificate of completion or transcript from the Career Tech attended.
2. A copy of your current Cardiopulmonary Resuscitation (CPR) Training card (front and back).
3. A copy of your current First Aid card (front and back).