The New York State Department of Education Bureau of Proprietary School Supervision 89 Washington Avenue, EBA 560 Albany, New York 12234

English as a Second Language School Registry Teacher Application (ESL Schools Only) BPSS-124 (07/17)

INSTRUCTIONS: The school should school administrative documents, ESI	L Teacher Appli	cation, and then e	mail	
BPSSTeachers@nysed.gov letting BPS	S know that it is	s ready for review.		
1. School Name				
2. School Address Street	City	State	Zip	
3. School E-mail Address				
4. Teacher Name First	Last			
5. Applicant's Anticipated First Date of Emplo	oyment			
REQUIR	ED QUALIFICAT	TIONS		
Baccalaureate Degree				
6. Granting Institution				
7. Subject Area	8. Date De	8. Date Degree Conferred		
9. If other than baccalaureate, please explain:	I			
	AND			
English as a Second Language Trainir				
10. Name of Program Completed				
11. Date Completed				
	OR			
12. One Year English as a Second Lar	nguage Teachin	g Experience		
Name of School:	Dates Emp	Dates Employed:		
Name of School:	Dates Emp	Dates Employed		
Name of School:	Dates Emp	Dates Employed		
I hereby acknowledge that the supportion contained on this application is on file Education Department staff.	_			
Signature of School Director	Printed N	Printed Name of Director		