





**STATE OF CONNECTICUT  
DEPARTMENT OF EMERGENCY SERVICES AND PUBLIC PROTECTION  
DIVISION OF STATE POLICE  
Criminal Justice Business Applications Unit**



**Student Teacher Program Enrollment**

Student teachers who are enrolled in a program that **does not** have a certification endorsement code (U, G, or N) in the designated institution box are **not required** to be fingerprinted and **do not** qualify for the \$75.00 state fee waiver. Schools can fingerprint student teachers in unapproved programs (at their discretion), but state law does not require the background check and the student teacher will pay the state fee.

**Schools must maintain documentation of a student teacher’s enrollment in an approved SDE-program for at least one year for state and federal auditing purposes. Schools that cannot verify a student teacher’s enrollment will be required to submit the correct state fee.**

**Examples**

<b>Institution</b>	<b>Program</b>	<b>Endorsement Code</b>	<b>Fingerprint</b>	<b>Fee</b>
Albertus Magnus College	Elementary, Grades 1-6	None	Not Required	State & Federal
Albertus Magnus College	Art, Grades, PK -12	U	Required	Federal Only
Albertus Magnus College	School Counselor	None	Not Required	State & Federal
Relay CT	English, Grades 7-12	N	Required	Federal Only

**Student Teacher Classification**

Schools must classify student teachers as paid or unpaid. Unpaid student teachers do not receive any direct payment. Schools that pay stipends directly to a college, university, or program must classify their student teachers as unpaid. Paid student teachers receive direct payment for their student teaching experience.

**Schools must maintain documentation of a student teacher’s classification for at least one year for state and federal auditing purposes. Schools that cannot verify a student teacher’s classification will be required submit the correct federal fee.**



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**Fees**

**SDE-Approved Program**

Unpaid Student Teacher     \$11.25  
Paid Student Teacher         \$13.25

**Unapproved Programs**

Unpaid Student Teacher     \$11.25 plus \$75.00  
Paid Student Teacher         \$13.25 plus \$75.00

**Fingerprinting Costs**

Fingerprints taken at a state police location will cost \$15.00 per fingerprint card. All other locations, such as a regional educational service center, police department, independent fingerprinting company, or school personnel can charge their own fingerprinting fees.

**Privacy Rights Forms**

Student teachers must complete a waiver and consent form, in addition to, the FBI Privacy Act Statement and Noncriminal Justice Applicant’s Privacy Rights forms. Local and regional school districts and state technical high schools must use the National Child Protection Act/Volunteer for Children Act (NCPA/VCA) Waiver and Consent form. All other schools must use the Volunteer and Employee Criminal History System (VECHS) Waiver and Consent form. Schools must retain all three forms for auditing purposes. Do not send these forms to the state police with the fingerprint card.

**Fingerprint Card Submission**

Fingerprint cards for student teachers in a SDE-approved program must have specific indicators on them. The front and back of all fingerprint cards must contain complete and accurate information. Enter the student teacher classification (paid or unpaid student teacher), in addition to, the student teacher’s employer information, in the “Employer’s Name and Address” section.



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**Sample Fingerprint Cards**

**Unpaid Student Teacher in an Approved Teacher Preparation Program**

<b>APPLICANT</b> DPS-125G REV. 10/11		LEAVE BLANK	<i>Print in black</i>				LEAVE BLANK - FPC			
			LAST NAME	FIRST	MIDDLE					
SIGNED (Person fingerprinted)		MAIDEN OR OTHER NAME		SOCIAL SECURITY #						
EMPLOYER'S NAME AND ADDRESS		RESIDENCE (Street, Town, State)				PLACE OF BIRTH				
<div style="border: 1px solid black; padding: 5px; background-color: yellow;"> <b>Unpaid Student Teacher &amp; Employer Information</b> </div>		SEX	RACE	HGT.	WGT.	HAIR	EYES	DATE OF BIRTH	SPBI #	IDENT BY
		IMPORTANT Applicant For				SEND REPLY TO (Police Dept., 1st Selectman, etc.) IMPORTANT				CLASSIFIED BY
DATE	SIGNED (Official taking prints)		<div style="border: 1px solid black; padding: 5px; background-color: yellow;"> <b>NCPA/VCA Volunteer</b> </div>				<div style="border: 1px solid black; padding: 5px; background-color: yellow;"> <b>School Information</b> </div>			SEARCHED BY
NOTE AMP	LEAVE BLANK									N.C. BY
		1. RIGHT THUMB	2. RIGHT INDEX	3. RIGHT MIDDLE	4. RIGHT RING	5. RIGHT LITTLE				

**Paid Student Teacher in an Approved Teacher Preparation Program**

<b>APPLICANT</b> DPS-125G REV. 10/11		LEAVE BLANK	<i>Print in black</i>				LEAVE BLANK - FPC			
			LAST NAME	FIRST	MIDDLE					
SIGNED (Person fingerprinted)		MAIDEN OR OTHER NAME		SOCIAL SECURITY #						
EMPLOYER'S NAME AND ADDRESS		RESIDENCE (Street, Town, State)				PLACE OF BIRTH				
<div style="border: 1px solid black; padding: 5px; background-color: yellow;"> <b>Paid Student Teacher &amp; Employer Information</b> </div>		SEX	RACE	HGT.	WGT.	HAIR	EYES	DATE OF BIRTH	SPBI #	IDENT BY
		IMPORTANT Applicant For				SEND REPLY TO (Police Dept., 1st Selectman, etc.) IMPORTANT				CLASSIFIED BY
DATE	SIGNED (Official taking prints)		<div style="border: 1px solid black; padding: 5px; background-color: yellow;"> <b>NCPA/VCA</b> </div>				<div style="border: 1px solid black; padding: 5px; background-color: yellow;"> <b>School Information</b> </div>			SEARCHED BY
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**Sample Fingerprint Cards**

**Unpaid Student Teacher in an Unapproved Teacher Preparation Program**

<b>APPLICANT</b> DPS-125C REV. 10/11		LEAVE BLANK	<i>Print in black</i>						LEAVE BLANK - FPC		
			LAST NAME	FIRST	MIDDLE						
SIGNED (Person fingerprinted)			MAIDEN OR OTHER NAME			SOCIAL SECURITY #					
EMPLOYER'S NAME AND ADDRESS			RESIDENCE (Street, Town, State)				PLACE OF BIRTH				
			SEX	RACE	HGT.	WGT.	HAIR	EYES	DATE OF BIRTH	SPBI #	IDENT BY
DATE	SIGNED (Official taking prints)		IMPORTANT Applicant For				SEND REPLY TO (Police Dept., 1st Selectman, etc.) IMPORTANT				CLASSIFIED BY
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**Paid Student Teacher in an Unapproved Teacher Preparation Program**

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SIGNED (Person fingerprinted)			MAIDEN OR OTHER NAME			SOCIAL SECURITY #					
EMPLOYER'S NAME AND ADDRESS			RESIDENCE (Street, Town, State)				PLACE OF BIRTH				
			SEX	RACE	HGT.	WGT.	HAIR	EYES	DATE OF BIRTH	SPBI #	IDENT BY
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