Saint Mary's College of California
KSOE Credential Office
Request for Credential Recommendation

Please submit this document electronically by uploading it to TaskStream. Please DO NOT email this document nor submit it on paper.

Please write your full name. Your last name must match that on your SMC records.

First Name: _____ Middle Initial:_____ Last Name:_____

Social Security Number: _____ Date of Birth: _____

Student ID # (7 digits):_____ Personal Email: _____

Type of Credential

Name of Credential:
- ◯ Education Specialist: Mild/Moderate Teaching Credential (Preliminary)
- ◯ Multiple Subject Teaching Credential (Preliminary)
- ◯ Single Subject Teaching Credential (Preliminary)

If Single Subject, specify subject area: Choose One:

By submitting this document I am indicating that I have met the following requirements and I am ready for the Credential Analyst to begin reviewing my credential application for submission to the CTC:

- I have met all KSOE program requirements.
- The above email and phone number will be valid for 90 days.
- I have uploaded all required credential documents to TaskStream and they have all been marked as "accepted".
- I understand that I must pay for my credential on the CTC website within 90 days of receiving my CTC recommendation email.
- I have confirmed that my CTC account has accurate and current contact information for me (www.ctc.ca.gov)

Note: This document is the last thing you submit. Please see the Credential Checklist for more information.