RE: Application for Reinstatement of Certificates

Pursuant to your request, please find enclosed an Application Packet for Reinstatement of professional educator certificates.

The Packet includes a Petition for Reinstatement and a Reinstatement Application that should be attached to the Petition for Reinstatement as an exhibit. In order to process the Reinstatement request, both the Petition for Reinstatement and the Application must be completed in full including the Authorization form and the Request for Criminal Record Check. Incomplete applications will not be processed.

As the petitioner in the reinstatement process, you bear the burden of establishing that reinstatement is just and proper. It is your right to have a hearing to present your case or you may decide to submit your case through documentary evidence only. Please note that you must expressly indicate on the Petition, by checking the appropriate box, whether an evidentiary hearing is requested or waived. If you elect not to have a hearing, all evidence that you want the Commission to consider in support of your Application, must be submitted with the Petition and Application in order to meet your burden.

If an evidentiary hearing is requested, a hearing examiner will be appointed and a hearing conducted in accordance with the General Rules of Administrative Practice and Procedure, 1 Pa. Code Part II. If an evidentiary hearing is waived, the Commission will consider the merits of the Petition for Reinstatement based on the Application and the Department’s recommendation pursuant to 24 P.S. § 2070.16.

In addition, we have enclosed a Request for Duplicate Certificate form (PDE 338 D) for you to complete and return with the Petition for Reinstatement and Application. Please note that the $15 fee is waived. In the event that the Commission grants the application for reinstatement, submission of the PDE
338 D will facilitate the reissuance of the certificate.

The original of the completed Application and Petition, including any attachments, must be filed with the Professional Standards and Practices Commission. A copy of the Petition and Application must be served upon the Office of Chief Counsel for the Department of Education either by hand delivery or by United States mail. The manner of service should be indicated on the Petition.

For your convenience, please find attached a copy of the provisions of the Professional Educator Discipline Act relating to reinstatement. Note that the revisions to the Act in 2000 placed restrictions on reinstatement, including a prohibition on the reinstatement of any certificate revoked or suspended as a result of conduct involving sexual abuse or exploitation.

If you have any questions, please feel free to contact me.

Sincerely,

Shane F. Crosby
Executive Director

Enclosures
COMMONWEALTH OF PENNSYLVANIA
PROFESSIONAL STANDARDS AND PRACTICES COMMISSION
HARRISBURG, PENNSYLVANIA

PETITION FOR REINSTATEMENT

IN RE: Petition of

______________________   _____Hearing Requested
(Insert Name)               _____Hearing Waived

_Failure to request or waive the hearing will be considered a waiver of hearing._


By the signature affixed below, the Applicant certifies that the information provided in the attached Reinstatement Application is complete, true and correct and made subject to the penalties of 18 Pa.C.S. §4904, which relates to unsworn falsification to authorities. Applicant also certifies that the original and one copy of this pleading, including the attached Reinstatement Application, have been filed with the Professional Standards and Practices Commission in accordance with 1 Pa. Code §33.15.

Applicant further certifies that a copy of this pleading, including the attached Reinstatement Application and all attachments thereto, has been served upon the Office of Chief Counsel for the Department of Education in accordance with 1 Pa. Code §33.32 and in the following manner:

Circle appropriate action being requested
(Please complete appropriate delivery method)

By hand delivery on __________________________

(date)

made at 333 Market Street, 9th Floor
Harrisburg, PA 17126-0333

OR

By U.S. Mail on __________________________

(date)

Postage prepaid, addressed to
Office of Chief Counsel, Department of Education,
333 Market Street, Harrisburg, PA 17126-0333

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<td>(Applicant’s name)</td>
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<td>(Street or Box Number)</td>
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<td>(City) (State) (Zip)</td>
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<td>(Phone Number) (Cell Phone) (Email Address)</td>
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<th>(Signature of Counsel, if applicable)</th>
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<td>(City) (State) (Zip)</td>
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<td>(Phone number) (Cell Phone) (Email Address)</td>
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Reinstatement Application

As the petitioner for reinstatement, you have the burden of establishing that reinstatement is just and proper. Thus, you must provide all of the information requested as well as any and all documents that support your reinstatement application. Incomplete or inaccurate responses will delay the processing of this application. In addition to providing the information requested, you may attach any additional information that may be helpful to the Commission in considering your application. Any information submitted under separate cover should be clearly identified as a part of your reinstatement application.

---

### A. GENERAL INFORMATION

1. Full Name: _______________________________ SSN: ____-____-________
   
   Maiden or Other Names by Which You Are or Have Ever Been Known:________________________________________________________________

2. Date of Birth: ________________________________________________
   
   Place of Birth: ________________________________________________

3. Current Home Address: ____________________________________________
   
   Street ____________________________________________
   
   City State Zip Code ____________________________________________
   
   Home Phone: ( ) _____________________________________
   
   Daytime Phone: ( ) _____________________________________
   
   Cell Phone: ( ) _____________________________________
   
   Email Address ( ) _____________________________________
4. Postsecondary Educational History:

<table>
<thead>
<tr>
<th>Name/Address of Institution</th>
<th>Program/Degree</th>
<th>Date Conferred</th>
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5. List each certificate issued to you by the Commonwealth of Pennsylvania by type of certificate (i.e., Instructional, Administrative, Supervisory, etc.), area of certification and date issued.

<table>
<thead>
<tr>
<th>State/Country/Territory</th>
<th>Certification</th>
<th>Date Conferred</th>
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6. Are you or were you ever certified as an educator in any other state, country or territory?
   Yes ( ) No ( ) If yes, list each certificate separately below:

<table>
<thead>
<tr>
<th>State/Country/Territory</th>
<th>Certification</th>
<th>Date Conferred</th>
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7. Was disciplinary action ever initiated or pursued against your certification in any other state/country/territory? Yes ( ) No ( ) If yes, please explain circumstances surrounding the action and indicate final disposition.

__________________________________________________________________________________
__________________________________________________________________________________
__________________________________________________________________________________
8. Have you surrendered your certification in any other state/country/territory? Yes ( ) No ( ) If yes, please explain the circumstances which led to the surrender.

________________________________________________________________

________________________________________________________________

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________________________________________________________________

B. PROFESSIONAL EXPERIENCE

1. Please list all positions held as a professional educator; list most recent position first:

<table>
<thead>
<tr>
<th>Position Held</th>
<th>Employer</th>
<th>Dates of Employment</th>
<th>Phone #</th>
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2. For each position listed in response to question #1 above, please provide the name and phone number of your immediate supervisor and state the reason that you left the position.

________________________________________________________________

________________________________________________________________

________________________________________________________________

________________________________________________________________

________________________________________________________________
3. Please provide the name and phone number of colleagues, other than your immediate supervisor(s), who are familiar with your performance in the professional positions listed above.

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Phone #</th>
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4. If you resigned from any position as a result of allegations of misconduct or were dismissed as a result of misconduct, please indicate which position and describe the circumstances surrounding the dismissal or resignation below.

C. CONDUCT RESULTING IN DISCIPLINARY ACTION

1. Date of Order revoking, suspending or accepting the surrender of your Pennsylvania certificate(s):
   Month  Day  Year

2. Was a hearing held prior to the surrender, revocation or suspension?
   Yes ( ) No ( ) If you elected not to have a hearing, please provide copies of any and all correspondence/documents/pleadings evidencing your decision to forego a hearing.

3. Describe the conduct that resulted in the revocation, suspension or surrender of your certificate(s).
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
   ____________________________________________________________
4. Attach any and all documents that relate to the circumstances that resulted in the revocation, suspension or surrender of your certificate(s).

5. Have you previously applied for reinstatement of your certification?

   Yes ( ) No ( ) If yes, provide the date of the prior application and a copy of any order issued by the Commission on the previous application.____________________________

   Month   Day   Year

D. **CRIMINAL BACKGROUND**

1. If you have been convicted of any crime or offense or entered an Accelerated Rehabilitation Disposition (ARD) program as the result of criminal charges, please provide the following information for each conviction in the space below:

   Crime or Offense;
   Date of Conviction;
   Place of Conviction;
   Name and Address of Prosecutor;
   Name and Address of Probation and/or Parole Officer;
   Sentence Received; and
   Time and Place of sentence served.

   ______________________________________________________________________

   ______________________________________________________________________

   Please provide a certified copy of all criminal court records verifying the information provided above, including the transcript of the sentencing hearing where applicable.

2. Please provide verification that you have successfully completed the terms of your sentence/probation or Accelerated Rehabilitation Disposition (ARD) program.

3. If there currently are pending criminal charges against you or if you are or have ever participated in an ARD (Accelerated Rehabilitation Disposition) program as a result of criminal charges, please provide a description of the charges below, including date of charges, nature of charges, jurisdiction where charges were lodged, and conditions of ARD, if applicable. Please attach certified court documents in support of the information provided.

   ______________________________________________________________________

   ______________________________________________________________________

   ______________________________________________________________________
E. **ACTIVITIES SINCE DECERTIFICATION**

1. Please list each and every position, including name, address, and phone number of employer, that you have held since your certificate was revoked, surrendered or suspended. List your most recent position first.

<table>
<thead>
<tr>
<th>Position Held</th>
<th>Employer</th>
<th>Address</th>
<th>Phone #</th>
<th>Dates Employed</th>
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2. List all residences maintained since the revocation, suspension or surrender of your teaching certificates, including the names, phone numbers and addresses of landlords, if applicable.

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<th>Residence (address)</th>
<th>Dates of Residence</th>
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(a) Since the revocation, suspension or surrender of your teaching certificate, have you applied for or received any license or certificate requiring proof of good character? Yes ( ) No ( )

If yes, list the name and address of the authority to which the application was sent and the date and ultimate disposition of the application:

<table>
<thead>
<tr>
<th>Authority Name</th>
<th>Address</th>
<th>Date</th>
<th>Disposition</th>
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4. As a member of any professional organization or holder of any office, certificate or license other than teaching, have you ever been the respondent in any procedure or inquiry that involved censure, removal, suspension, annulment, revocation or discipline?

Yes ( ) No ( )

If yes, describe the nature of complaint, its disposition, and the name and phone of person(s) who can verify this information:

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<th>Complaint</th>
<th>Disposition</th>
<th>Name/ Phone # of Verifier</th>
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F. **REHABILITATION**

Please detail any and all efforts that you have made to address the conduct that led to the suspension, revocation or surrender of your teaching certificate(s). If you have engaged in activities such as counseling, professional development, or community service, please describe the activity in full and provide the name, address, and phone # of a contact person for each activity. In addition, you must submit documentary support for each rehabilitative effort noted, such as letters from counselors/therapists verifying your treatment progress or transcripts for courses taken.

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________
G. REFERENCES

List the names, addresses, and phone numbers of at least five people who can attest to your character. You must enclose letters of support from these references. References should expect to be contacted by the Department regarding this application and should be aware of the circumstances that led to the suspension, revocation or surrender of your certificate(s).

<table>
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<tr>
<th>Name</th>
<th>Address</th>
<th>Phone #</th>
<th>Relationship to Applicant</th>
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H. PERSONAL STATEMENT

On a separate sheet of 8½” x 11” paper, please explain why your certificate should be reinstated. The personal statement is one of the critical elements of your application. Applications submitted without a personal statement will not be considered.

I. CRIMINAL HISTORY BACKGROUND CHECK

Any person who applies for reinstatement of a revoked, suspended or surrendered teaching certificate(s) is required to submit to a state (Pennsylvania State Police) Criminal History Records Check. Please use the attached form to request a criminal history record from the Pennsylvania State Police or you may visit the Pennsylvania State Police website to download the form at www.psp.state.pa.us. Click on Documents, Forms and Brochures, PSP Forms Available for Public and Criminal History Request Form – SP 164. Results of the Criminal History Records Check must be forwarded with your Petition and Reinstatement Application.

J. AUTHORIZATION FORM

All applicants must submit a completed notarized Authorization Form (attached), which permits the Department to obtain copies of documents necessary to its investigation of your application.
K. **FILING INSTRUCTIONS**

Please send the original and one copy of the Petition and Reinstatement Application including the Criminal History Background Check and Authorization form to:

Professional Standards and Practices Commission  
Pennsylvania Department of Education  
333 Market Street, 9th floor  
Harrisburg, PA 17126-0333  
Attn: Carolyn Angelo

Please send a copy of the Petition and Reinstatement Application to:

Office of Chief Counsel  
Pennsylvania Department of Education  
333 Market Street, 9th Floor  
Harrisburg, PA 17126-0333
AUTHORIZATION

To Whom It May Concern:

This is to authorize you to release upon request of the Commonwealth of Pennsylvania, Department of Education, 333 Market Street, Harrisburg, Pennsylvania, 17126-0333, a copy of all records in your possession, custody and/or control pertaining to ___________________________.

(Name)

Although this authorization is a photocopy rather than an original, an original authorization form has been signed by me and is maintained at the Office of Chief Counsel of the Department of Education.

____________________________
Name (please print)

____________________________
Signature

Sworn to and Subscribed before me this

___ day of ________________, ______

____________________________
Notary Public Commonwealth of Pennsylvania
Professional Educator Discipline Act (24 P.S. §2070.1 et seq.)

§ 2070.16. Reinstatement.

(a) Any professional educator whose certificate has been suspended, revoked, or surrendered may apply to the commission for an order lifting the suspension or reinstating the certificate. The commission shall order the lifting of the suspension or reinstatement if the commission determines it would be just and proper. The commission shall seek and consider recommendations from the department prior to ordering the lifting of the suspension or reinstatement of the certificate and shall conduct hearings on the application at the request of the professional educator in accordance with procedures of this act. For purposes of determining whether it is just and proper to lift a suspension or reinstate a certificate, at a minimum, the commission may consider:

1. the conduct which resulted in discipline;
2. other past conduct of the applicant;
3. the applicant's current attitude towards past conduct;
4. rehabilitation efforts and activities;
   (a) references and letters of support or opposition.

(b) The commission shall not lift the suspension or reinstate the certificate of a professional educator if the suspension or revocation resulted from any of the following:

1. A finding of guilt by the commission for sexual abuse or exploitation;
   (a) Surrender of a certificate in lieu of discipline for conduct relating to sexual abuse or exploitation.

(c) The commission shall not lift the suspension or reinstate the certificate of a professional educator convicted of an offense under 18 Pa. C.S. (relating to crimes and offenses) set forth in section 111(e)(1) through (3) of the act of March 10, 1949 (P.L. 30, No. 14) known as the “Public School Code of 1949” for the time period set forth in that section.

Source
This provision can be found at 24 P.S. §2070.16.


§233.123. Reinstatements.

(a) Application for reinstatement.

1. Under section 16 of the act (24 P. S. § 2070.16), an educator whose certificate or eligibility to serve in a charter school has been suspended, surrendered or revoked may apply to the Commission for an order lifting the suspension or reinstating the certificate or eligibility. The application should be filed with the Commission, served
upon the Department in accordance with 1 Pa. Code Part II (relating to General Rules of Administrative Practice and Procedure), and be in the form prescribed by the Commission. The educator shall indicate expressly whether the educator wishes to invoke or waive the right to a hearing.

(2) The Commission will immediately assign a docket number and inform the educator, the Department and the governing board of the school entity by which the applicant was last employed.

(3) In accordance with section 16(b) of the act, the Commission will not consider any application for reinstatement of any educator whose certificate or eligibility was revoked or suspended as a result of a finding of guilt for sexual abuse or exploitation or who surrendered a certificate or eligibility in lieu of discipline for conduct related to sexual abuse or exploitation.

(4) In accordance with section 16(c) of the act, the Commission will not consider any application for reinstatement of a certificate or eligibility of an educator convicted of a crime under 18 Pa.C.S. (relating to the Crimes Code) set forth in section 111(e)(1)—(3) of the Public School Code of 1949 (24 P. S. § 1-111(e)(1)—(3)) for the time period established in that section.

(b) Recommendation of the Department.

(1) Under section 16 of the act, the Department may review the application and, based upon the investigation and information it might deem appropriate, make a recommendation regarding the application within 90 days, or the time designated by the Commission, after its receipt of the application.

(2) The recommendation of the Department should be served upon the educator in accordance with 1 Pa. Code Part II.

(3) The Executive Director will verify that the Department has received the application for purposes of making a recommendation. If the Commission has not received the Department's recommendation or a request for additional time in which to respond within the time prescribed, the Commission will presume that the Department has no position on the application.

(4) The decision making of the Commission will be best served if the Department conducts an investigation of the justification and propriety of the relief requested by the educator and provides complete information to support its recommendation.

(c) Notices.

(1) The confidentiality provisions of section 10 of the act (24 P. S. § 2070.10) do not apply to applications for reinstatement. It is the policy of the Commission to
conduct proceedings involving applications for reinstatement in public and to provide the public with a full opportunity to comment upon these applications.

(2) If the Department recommends approval of the application or fails to make a recommendation, the Executive Director of the Commission will publish in the Pennsylvania Bulletin a notice of opportunity for hearing consistent with the format prescribed by 1 Pa. Code § 11.31 (relating to sample notice of opportunity for hearing). The notice will describe the application and the Department’s recommendation and will state that the Commission may act upon the application, without hearing, unless within 30 days an interested party or entity files a petition to intervene or files a protest to the application with the Commission under 1 Pa. Code §§ 35.23 and 35.24 (relating to protests).

(3) If the Department opposes the application, but the applicant has waived the opportunity for hearing and the Department has not requested a hearing, the Executive Director of the Commission will publish in the Pennsylvania Bulletin a notice of opportunity for hearing consistent with the format prescribed by 1 Pa. Code § 11.31. The notice will describe the application and the Department’s recommendation and will further state that the Commission may act upon the application, without hearing, unless within 30 days an interested person or entity files a petition to intervene or files a protest to the application with the Commission under 1 Pa. Code §§ 35.23 and 35.24.

(4) If the Department opposes the application and the applicant or the Department has requested a hearing, or if the Commission determines to hold a hearing without request, the Executive Director will publish in the Pennsylvania Bulletin a notice of hearing consistent with the format prescribed by 1 Pa. Code § 11.32 (relating to sample notice of hearing). The notice will describe the application and the Department’s recommendation and will state that a hearing officer has been appointed to conduct hearing proceedings in accordance with the act, 1 Pa. Code Part II and other rules and procedures the Commission might promulgate. The notice will further provide interested persons and entities 30 days within which to petition to intervene or file protests with the Commission.

(5) The Executive Director will provide copies of all notices prescribed by this subsection to the applicant educator, the Department and the governing board of the school entity by which the applicant was last employed, if known.

(d) Waiver of hearing. Notwithstanding the educator’s waiver of a hearing, the Department may request a hearing or the Commission may appoint a hearing officer to prepare a proposed report or proceed directly to consider the application.

(e) Hearing procedures.

(1) Hearing officer appointed. If it has been determined that a hearing will be held, the Commission will appoint a hearing officer from a list of impartial third parties
qualified to conduct hearings from the list agreed upon jointly by the Governor’s General Counsel and at least two-thirds of the Commission under section 13(c)(1) of the act.

(2) Burden of proof.

(i) Burden of proof on applicant. The burden of proof is on the applicant to establish that the relief the applicant seeks is just and proper.

(ii) Just and proper standard. For purposes of determining whether it is just and proper to lift a suspension or reinstate a certificate, at a minimum, the Commission may consider the following:

(A) The conduct which resulted in discipline or which led to the surrender.
(B) Other past conduct of the applicant.
(C) The applicant’s current attitude towards past conduct.
(D) Rehabilitation efforts and activities.
(E) References and letters of support or opposition.

(3) Right to counsel. An applicant has the right to be represented by counsel and to present evidence and argument in accordance with 1 Pa. Code Part II and other rules of procedure promulgated by the Commission.

(4) Hearing officer’s decision. Within 60 days after the conclusion of the hearing, including briefing and oral argument, the hearing officer will issue a decision concerning whether relief should be granted. A decision will include proposed findings of fact and conclusions of law, and will specify the relief, if any, proposed.

(5) Exceptions to hearing officer’s decision.

(i) The decision of the hearing officer will become final unless excepted to by a party within 30 days after the filing and service of the recommended decision. If no timely exceptions are filed, the Commission will at its next regularly scheduled meeting consider the report of the hearing officer and issue an order implementing the hearing officer’s decision.

(ii) If timely exceptions are filed, the Commission, within a reasonable time, will consider the exceptions and by a majority vote of its full membership, will accept, modify or reject the hearing officer’s decision. The Commission will issue a written opinion and order announcing its decision within 45 days of receiving the exceptions or brief on exceptions and hearing oral argument.

(6) Automatic reinstatement.

(i) Any professional certificate or eligibility suspended or revoked pursuant to a criminal indictment or conviction under section 9.2 of the act (24 P. S. § 2070.9b) will be reinstated upon notice to the Commission that the criminal indictment has been dismissed or that the conviction was overturned and the underlying charges dismissed.
(ii) Notice to the Commission means the filing of court records reflecting the dismissal. The court records shall be certified or bear comparable written indicia of validity.

(iii) Upon receipt of the notice, the Commission will provide the Department and the governing board of the school entity by which the educator was last employed with a copy of the notice. Within 10 days from the receipt of the notice, the Department may challenge the validity of the court records. In the absence of challenge, the Commission will direct the Department to immediately reinstate the certificate or eligibility.

(iv) The Commission authorizes its legal counsel to enter reinstatement orders. Legal counsel shall report all reinstatement orders to the Commission at its regularly scheduled meetings.

Source
These provisions can be found at 22 Pa. Code § 233.123.