

**New Mexico Public Education Department**

**Professional Licensure Bureau**

**Dossier and OPAL System User Manual for**

**Educators**

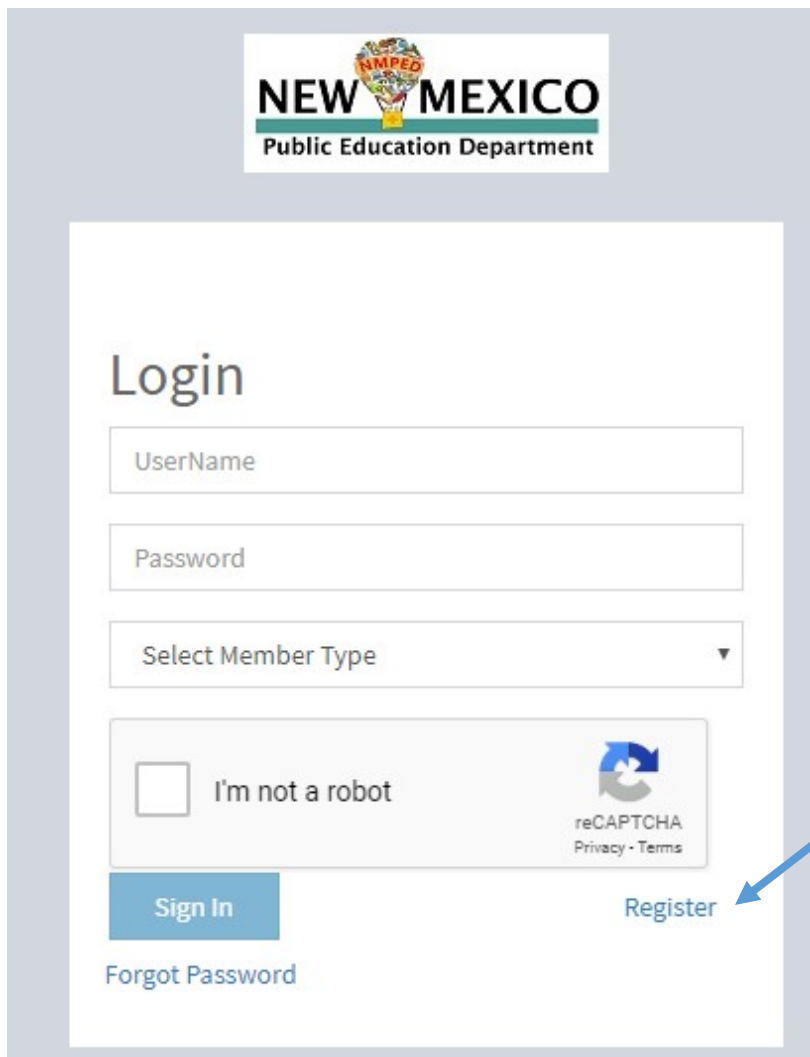
## Introduction:

This document is a step by step guide which will help you create your account for dossier and OPAL submissions and guide you through the process of submitting your documents for review.

## Account Registration:

Go to: <https://licensure.ped.state.nm.us/>

Here you will leave all the login information blank and just select **register**.



**NEW MEXICO**  
Public Education Department

### Login

UserName

Password

Select Member Type ▼

I'm not a robot

reCAPTCHA  
Privacy - Terms

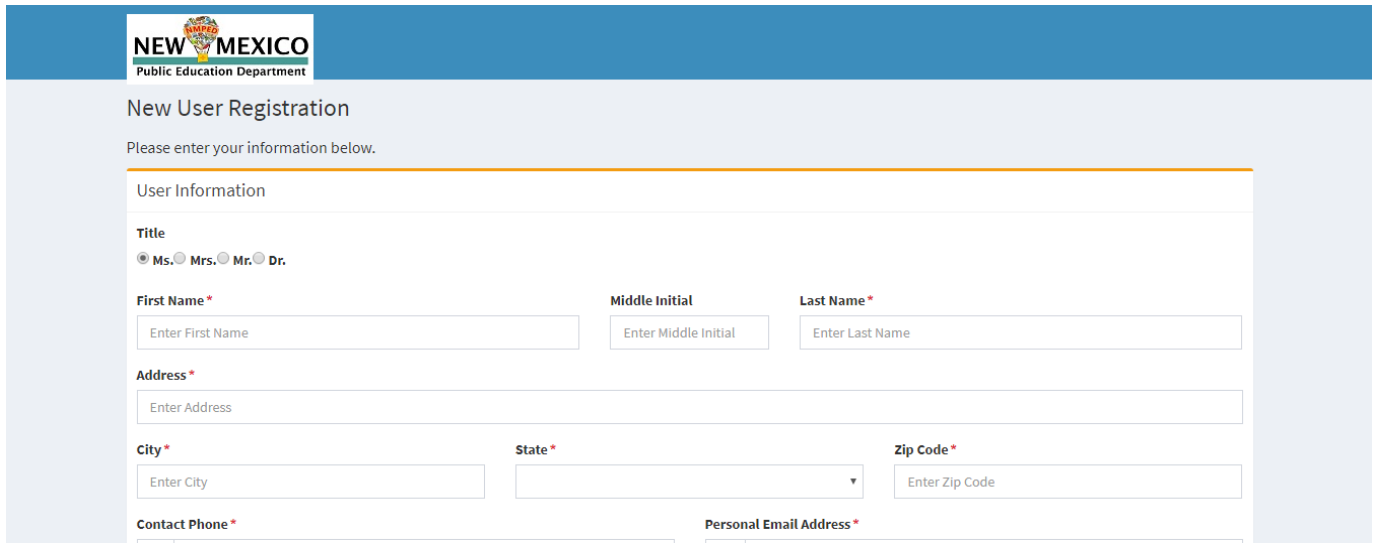
Sign In

Register

Forgot Password

Next you will register for an account. Please ensure you complete all required fields which are marked with a red asterisks. If you need to look up your NM license number click on this link: [Online License Lookup](#)

Your first and last name must match what is reflected on your most current license.



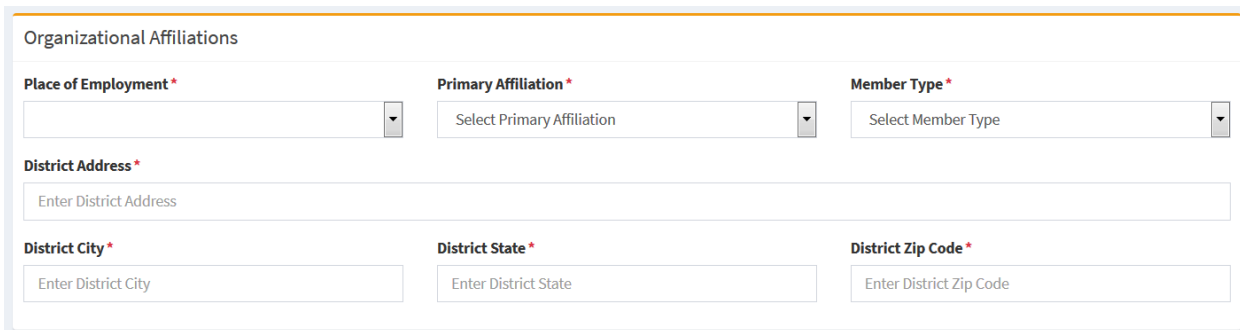
The screenshot shows the 'New User Registration' form for the New Mexico Public Education Department. The form is titled 'New User Registration' and includes the instruction 'Please enter your information below.' The form is divided into several sections: 'User Information', 'Title', 'First Name', 'Middle Initial', 'Last Name', 'Address', 'City', 'State', 'Zip Code', 'Contact Phone', and 'Personal Email Address'. The 'Title' section has radio buttons for 'Ms.', 'Mrs.', 'Mr.', and 'Dr.'. The 'First Name', 'Middle Initial', and 'Last Name' fields are text boxes. The 'Address' field is a text box. The 'City' field is a text box, the 'State' field is a dropdown menu, and the 'Zip Code' field is a text box. The 'Contact Phone' and 'Personal Email Address' fields are text boxes.

Place of employment is your district or state charter.

Primary Affiliation is your school or state charter.

Member type is teacher.

When you enter your place of employment and primary affiliation the address of the district or charter school central office should auto populate, if this doesn't occur please enter the central office address for your district or charter school. This information is key as it helps determine the reviewers of your submission.



The screenshot shows the 'Organizational Affiliations' form. The form is titled 'Organizational Affiliations' and includes several fields: 'Place of Employment', 'Primary Affiliation', 'Member Type', 'District Address', 'District City', 'District State', and 'District Zip Code'. The 'Place of Employment', 'Primary Affiliation', and 'Member Type' fields are dropdown menus. The 'District Address' field is a text box. The 'District City', 'District State', and 'District Zip Code' fields are text boxes.

Once you've enter all the information, select I am not a robot and click on register.

Demographic Information


Date of Birth\*

Gender\*  Male  Female

Ethnicity\*

County\*

Licensure Number\*

I'm not a robot 

Once you successfully register you will receive notification to login and create your profile.

### Trouble shooting errors:

If you receive an error that your licensure information doesn't exist check the following at the [Online License Lookup](#).

- Name entered matches the name reported on the licensure information
- License number matches
- Birthdate is correct, and entered in the correct format: mm/dd/year

If all of this information is entered correctly and you are still receiving an error message please send a help request to: [Dossier.Support@state.nm.us](mailto:Dossier.Support@state.nm.us)

Include the following information:

- **Subject Line:** Support for **(insert your license number here)**
- Full name
- License number
- Screen shot of error message

## Profile Creation:

Return to the login in page <https://licensure.ped.state.nm.us/> and login using your email and password created during registration.

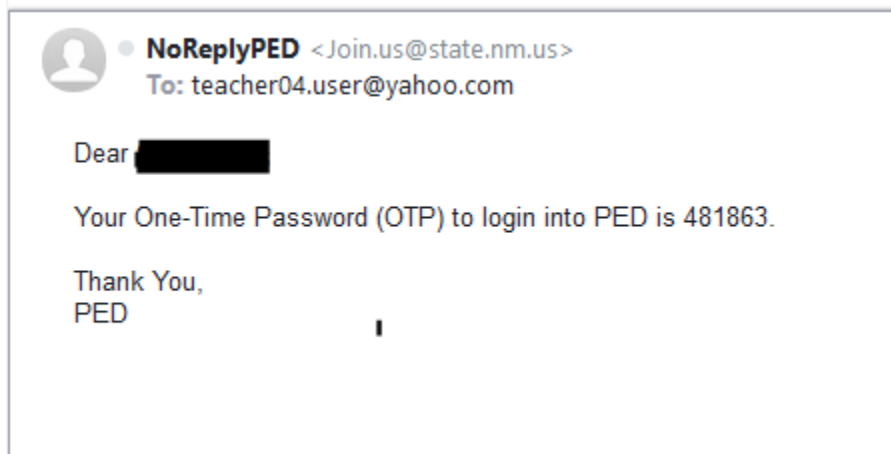
The image shows a screenshot of the login page for the New Mexico Public Education Department. The page features the department's logo at the top, followed by the heading "Login". Below the heading are five main input areas, each indicated by a numbered callout box:

- 1**: Points to the "UserName" input field.
- 2**: Points to the "Password" input field.
- 3**: Points to the "Select Member Type" dropdown menu.
- 4**: Points to the "I'm not a robot" checkbox area, which includes a reCAPTCHA logo and "Privacy - Terms" link.
- 5**: Points to the "Sign In" button.

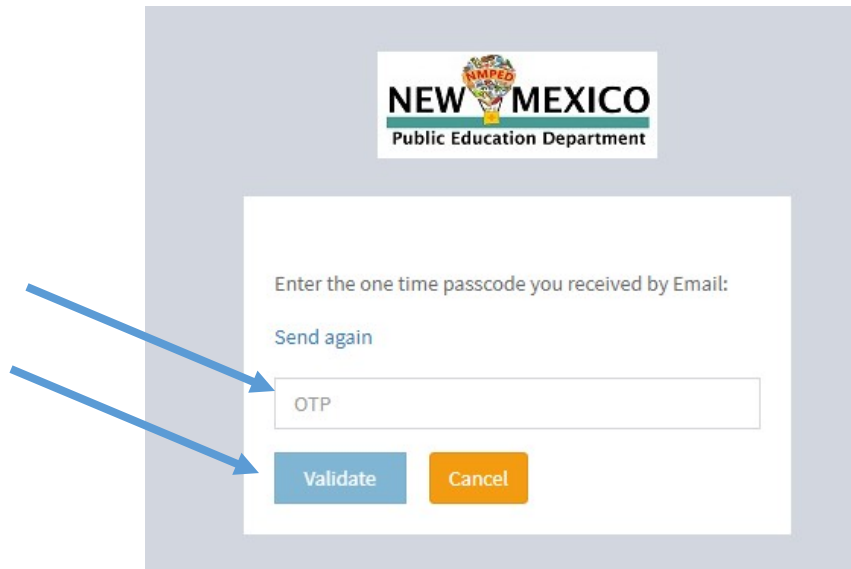
Additional elements on the page include a "Register" link, a "Forgot Password" link, and a "reCAPTCHA" logo with "Privacy - Terms" link.

**Member type:** select what you are submitting three tier licensure for dossier or OPAL for OPAL submission.

As an additional security measure each time you sign in you will be required to enter a one-time passcode (OTP). The OTP will be sent to your registered email.



Enter the code and hit validate, this will take you to the create profile page.



The general information you entered during registration will pre populate in the top section of the page. Double check to ensure what you entered is correct. You will need to update the **email address** to your **work email address**. **Note updates to address or name made here will not update your information in the NMPED licensure data base. To make updates please complete the form found on the licensure website.**

**Name Change:** <https://webnew.ped.state.nm.us/wp-content/uploads/2019/07/2019-Request-for-Licensure-Name-Change.pdf>

**Address Change:** <https://webnew.ped.state.nm.us/wp-content/uploads/2019/07/2019-Change-of-Address-Notice.pdf>

Create Profile

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General Information

<b>First Name *</b> Test	<b>Middle Initial</b> Enter Middle Initial	<b>Last Name *</b> User
<b>Address *</b> 1234 Test Address		
<b>City *</b> Santa Fe	<b>State *</b> New Mexico	<b>Zip Code *</b> 87507
<b>Primary Phone *</b> 5058274522	<b>Alternate Phone</b>	<b>Work Email Address *</b> Enter Work Email Address
<b>Birth Date</b> 01/18/1970	<b>Gender *</b> Female	
<b>Ethnicity *</b> Hispanic/Latino		

Next you will complete the remaining fields.

From which state did you receive your advanced degree?

State\*

If your degree is from New Mexico then select an Institution

Institution

County

Region

Primary Endorsement

Grade Level Currently Teaching

Notes

Preferred Language

Other

**Advance degree:** this is your highest degree earned (i.e. Bachelors, Masters)

**County:** this is the county where your district is located

**Region:** this is your district or charter school

**Primary endorsement:** this should be the subject area for which you are writing the OPAL or dossier. If you are an elementary teacher you may leave this blank.

**Grade level:** if you are teaching multiple levels you may list more than one.

**Notes:** Use this section to add any additional licensure information that is pertinent to your submission that wasn't captured in the questions.

**The next step is to complete the Professional Fitness Questions:**

### Professional Fitness

Note: If you answer "yes" to any of the questions 1-6 below, provide a complete narrative description of the details about your answer(s) on a separate document, including dates, places, school systems, and circumstances, and send that to: PED Licensure-Background Bureau, 300 Don Gaspar, Santa Fe, NM 87501. Also include your name, your licensure number and the questions to which you are responding.

Review the directions carefully, failure to complete this section accurately may result in the delay of your license moving forward.

If you completed an alternative licensure program or you are submitting your OPAL you will enter the information here. If not you will select **No**.

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## Alternative Licensure Program

1. Are you currently enrolled in or have you completed an alternative licensure program

Select Answer

2. If you answered yes, tell us what program or institution you have attended.

Next you'll complete the Acknowledgements and Obligations section:

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### Acknowledgements and Obligations

- I understand that licensure in the State of New Mexico is a privilege granted by the Public Education Department and that this privilege may be suspended or revoked for incompetency, immorality, or other good and just cause.
- I acknowledge that where licensure is required, by practicing as an educator or working in any school without Public Education Department licensure or official waiver granted by the New Mexico Secretary of Education is grounds for denial of any licensure application and may subject me to criminal and civil penalties as provided for by law.
- I have read and agree to abide by the New Mexico Educator Code of Ethics and Standards of Professional Conduct found: [Here](#)
- I understand that my address and name detailed in this application will be the official address and name recorded in Public Education Department official records until a change of record form is received and that all communications regarding my educator licensure will be sent to the official address and name in the Public Education Department official records.
- I understand that I am obligated to complete a change of official record form within 30 days if I move, or change my name.

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Finally you will review and affirm your response to the oath and then select save.

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### Oath

Warning: False statements or omissions are cause for denial, suspension, or revocation of licensure.

By submitting this information, I NM PED swear or affirm under the penalty of perjury that all information I have submitted in this application is true, correct, and complete to the best of my knowledge, information, and belief. I understand that any material misrepresentation of material omission of fact in this application are grounds for denial, suspension, or revocation of the educator license(s) that I am seeking. Click Box "I Swear or Affirm".

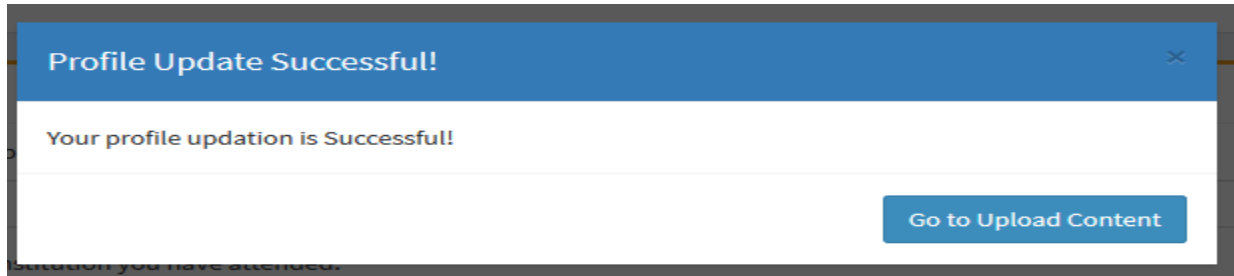
I Swear or Affirm

Save





Once all information is successfully updated you will receive this message:

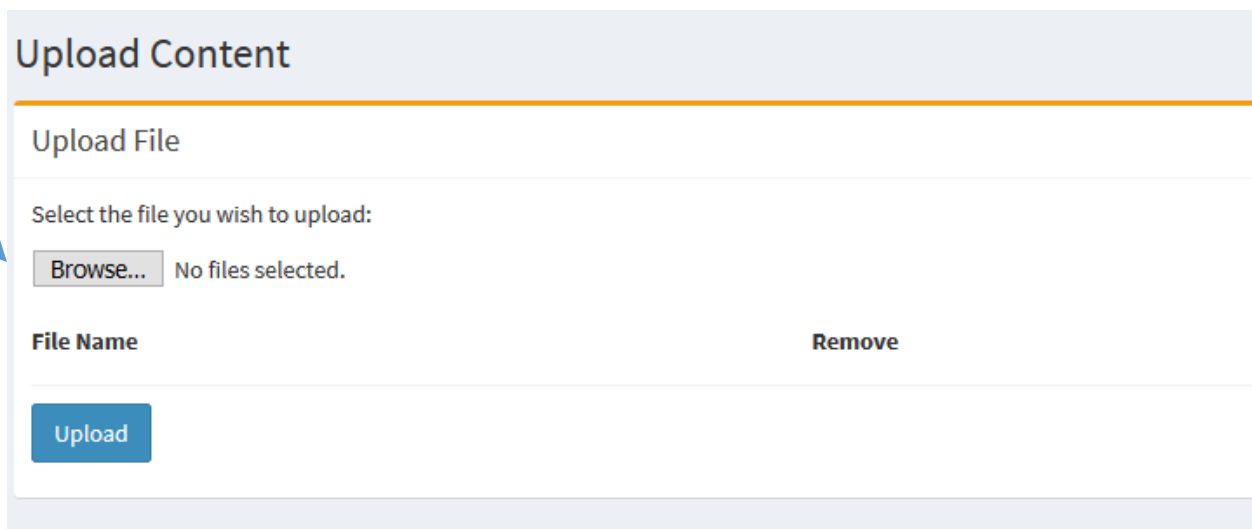


Now you will click on upload content to proceed. If you are not ready to upload content you may log out and log back in when you are ready.

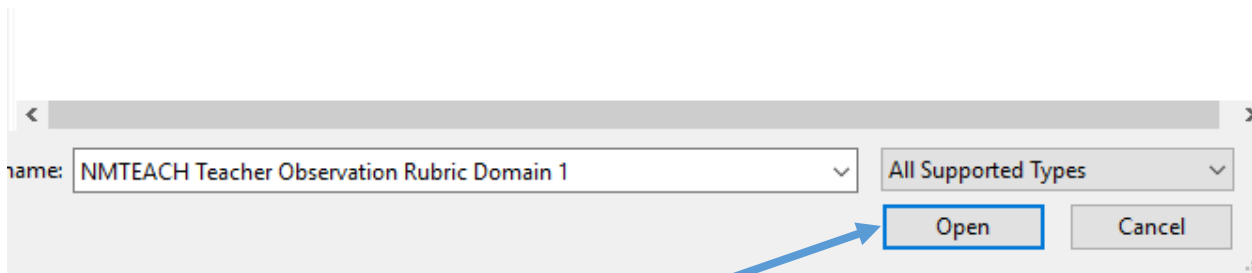
### Document Submission:

Now you may submit your strands for your Dossier or OPAL submission. Templates for the strands may be found on the NMPED Website under the Licensure Bureau.

<https://webnew.ped.state.nm.us/bureaus/licensure/>



Click on browse to select the files you wish to upload, find the files you've saved on your computer, select them, and click on open.



Once you've select all of your documents you will see them populated in the top section:

## Upload File

Select the file you wish to upload:

No files selected.

### File Name

**NMTEACH Teacher Observation Rubric Domain 1.pdf(0.448371 MB)**  
**NMTEACH Teacher Observation Rubric Domain 2.pdf(0.468892 MB)**  
**NMTEACH Teacher Observation Rubric Domain 3.pdf(0.433373 MB)**  
**NMTEACH Teacher Observation Rubric Domain 4.pdf(0.440213 MB)**

### Remove

[delete](#)  
[delete](#)  
[delete](#)  
[delete](#)

Review all of the documents in the queue and select delete if there are any you want to remove. Once you have all the documents you want in the queue select upload. You will repeat this process until all of the documents you wish to submit are in the existing files queue.

Once you select upload the files will move to the Existing files section.

## Existing Files

The following is a list of files currently in your directory. Click on the file name to download the file. Click on the table header to sort the files:

Show  entries

DocumentName	Delete	ContentLength (in KB)
<a href="#">NMTEACH Teacher Observation Rubric Domain 1.pdf</a>	<input type="button" value="X"/>	437
<a href="#">NMTEACH Teacher Observation Rubric Domain 2.pdf</a>	<input type="button" value="X"/>	457
<a href="#">NMTEACH Teacher Observation Rubric Domain 3.pdf</a>	<input type="button" value="X"/>	423
<a href="#">NMTEACH Teacher Observation Rubric Domain 4.pdf</a>	<input type="button" value="X"/>	429

Once you are ready to submit review all of the documents in your existing file queue. Use the blue X in the delete column to remove a document and then select next at the bottom of the page.









## Review Content:

### Review Content

Existing Files

The following is a list of files currently in your directory. Click on the file name to download the file. Click on the table header to sort the files:

Show  entries

DocumentName	Delete	ContentL
 NMTEACH Teacher Observation Rubric Domain 1.pdf		437
 NMTEACH Teacher Observation Rubric Domain 2.pdf		457
 NMTEACH Teacher Observation Rubric Domain 3.pdf		423
 NMTEACH Teacher Observation Rubric Domain 4.pdf		429

Showing 1 to 4 of 4 entries

This section allows you one last opportunity to review all of your documents for submission. When you are ready to submit select submit at the bottom of the page.

## Submitting Payment:

Online payment is currently unavailable, you will complete the steps in this section to pay for your submission.

### Pay For Review

Submission Amount: **320 USD**

**Please download and fill out the “PDD OPAL Payment Form.pdf” along with your payment.**

**Please submit your payment in the form of a cashier’s check or money order to the following:**

**New Mexico Public Education Department**  
**Professional Licensure Bureau**  
**300 Don Gaspar**  
**Santa Fe, NM 87501**

**Once your payment is received your submission will move forward to the review process.**

Once you've downloaded the form to send in for payment you will select submit to complete the Acknowledgements and Obligations and Oath sections.

Submit / Resubmit

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ACKNOWLEDGEMENTS AND OBLIGATIONS

- I understand that licensure in the State of New Mexico is a privilege granted by the Public Education Department and that this privilege may be suspended or revoked for incompetency, immorality, or other good and just cause.
- I acknowledge that where licensure is required, by practicing as an educator or working in any school without Public Education Department licensure or official waiver granted by the New Mexico Secretary of Education is grounds for denial of any licensure application and may subject me to criminal and civil penalties as provided for by law.
- I have read and agree to abide by the New Mexico Educator Code of Ethics and Standards of Professional Conduct found: [Here](#)
- I understand that my address and name detailed in this application will be the official address and name recorded in Public Education Department official records until a change of record form is received and that all communications regarding my educator licensure will be sent to the official address and name in the Public Education Department official records.
- I understand that I am obligated to complete a change of official record form within 30 days if I move, or change my name.

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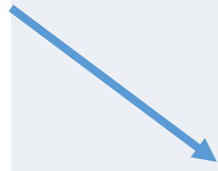
OATH

FALSE STATEMENTS OR OMISSIONS ARE CAUSE FOR DENIAL, SUSPENSION, OR REVOCATION OF LICENSURE

I  , swear or affirm under the penalty of perjury that

All information I submitted in this application is true, correct and complete to the best of my knowledge, information, and belief. I understand that any material misrepresentation or material omissions of fact in this application are grounds for denial, suspension, or revocation of the educator license(s) that I am seeking. Should a license be issued in error I understand PED has the option to rescind my license.

TO  8/5/2019



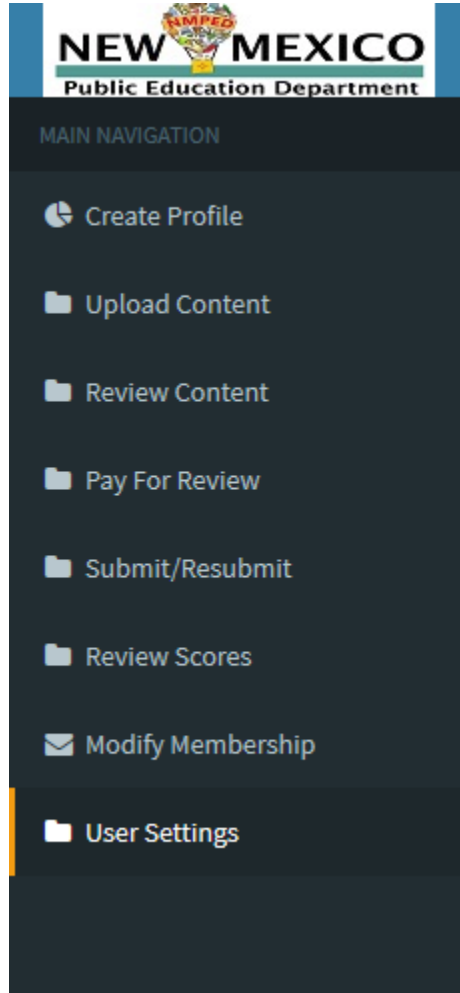
Once you've completed this section, select submit. This takes you to the Review Scores Page where you will see the progress of your submission:

Review Scores

Payment Status	Pending
Administrator Review	Pending
Strand A	Pending
Strand B	Pending
Strand C	Pending
PLB Review	Pending
Summary	Pending
<b>your submission is Pending.</b>	

## Other Functions:

The navigation bar on the left side of the page will allow you to access each section of the system.



**Modify Membership:** This allows you to update the school where you are working.

Modify Membership

Modify Membership Save Affiliation

Search:

Primary	Secondary	Affiliation Name	Description	Type
<input type="radio"/>	<input checked="" type="checkbox"/>	ALAMOGORDO HIGH		public

**User Settings:** In this section you are able to make updates to your profile.

### User Settings

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#### Email Setting

**Email Address \***

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#### Password Setting

**Password \***

**Password (Again) \***

**Password Rules**

Password must be at least eight characters long.

Password must contain at least one upper, one lower and one numeric character.

Passwords must contain at least one special characters. (eg. -, +, !, &, \$, or ?)

### User Information

**First Name \***  **Middle Initial**  **Last Name \***

**Address \***

**City \***  **State \***  **Zip Code \***

**Contact Phone \***  **Place of Employment \***

**Date of Birth \***  **Gender \***  Male  Female **Ethnicity \***

**Location \***

## **Support:**

For technical assistance please email:

[dossier.support@state.nm.us](mailto:dossier.support@state.nm.us)

All emails will be reviewed and responded to within 24 hours. Please include the following information in your email:

**Subject Line:** Support for **(insert your license number here)**

**Body of Email:**

- Full name
- License number
- Screen shot of error message or problem you are having

Templates for submission are located on the NMPED website under Licensure:

<https://webnew.ped.state.nm.us/bureaus/licensure/>