

Type or print in ink.
 Make checks payable to
 Treasurer of Virginia.

Virginia Department of Education
 Division of Teacher Education and Licensure
 P.O. Box 2120
 Richmond, Virginia 23218-2120

March 2014

APPLICATION FOR LICENSE RENEWAL
Individualized Renewal Record (Page 1 of 3)

Please submit a complete application with supporting credentials. The renewal fee is \$25. A \$35 fee is assessed for a returned check.

Part I-INFORMATION

PLEASE PRINT OR TYPE

<u>Last Name</u>	<u>First Name</u>	<u>Middle Name</u>	<u>License No. or Social Security No.</u>
Home Address*		City	State Zip Code
Daytime Telephone Number (include area code) ()		Home Telephone Number (include area code) ()	
Endorsement(s)	Highest Degree Earned		Renewal Year
Virginia employing school division or accredited nonpublic school (if applicable)			

***THE APPLICANT MUST NOTIFY THE OFFICE OF LICENSURE, DEPARTMENT OF EDUCATION, IN WRITING OF AN ADDRESS CHANGE. Name and address (of persons applying for a license) may be disseminated pursuant to a request under § 2.2-3802(5) of the Code of Virginia.**

Part II

Have you ever been convicted of, or entered a plea of guilty or no contest to, a felony? (If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court of conviction.)	___Yes	___No
Have you ever been convicted of, or entered a plea of guilty or no contest to, a criminal offense in another country? (If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court of conviction.)	___Yes	___No
Have you ever been convicted of, or entered a plea of guilty or no contest to, a misdemeanor involving a child (minor)? (If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court of conviction.)	___Yes	___No
Have you ever been convicted of, or entered a plea of guilty or no contest to, a misdemeanor involving drugs (not alcohol)? (If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court of conviction.)	___Yes	___No
Have you ever had a teaching, administrator, pupil personnel services, or other education-related certificate or license revoked, suspended, invalidated, cancelled, or denied by another state, territory, or country; surrendered such a license; or had any other adverse action taken against such a license? (If yes, please attach a statement giving full details and official documentation of the action taken.)	___Yes	___No
Have you ever been the subject of a founded complaint of child abuse or neglect by a child protection agency? (If yes, please attach a statement giving full details and official documentation of the founded complaint.)	___Yes	___No
Have you ever left any education- or school-related employment, voluntarily or involuntarily, while the subject of an investigation, inquiry, or review of alleged misconduct or when you had reason to believe an investigation of alleged misconduct was under way or imminent? (If yes, please attach a statement giving full details and any official documentation available regarding the investigation, inquiry, or review.)	___Yes	___No
To your knowledge, are you currently the subject of any investigation, inquiry, or review of alleged misconduct that could warrant discipline or termination by a school division or other education-related employer or an adverse action against a teaching, administrator, pupil personnel services, or other education-related license or certificate? (If yes, please attach a statement giving full details and any official documentation available regarding the investigation, inquiry, or review.)	___Yes	___No

Part III-Signature and Verification of Renewal Activities

BY MY SIGNATURE I CERTIFY THAT THE INFORMATION ON THIS THREE PAGE APPLICATION IS ACCURATE AND COMPLETE. I UNDERSTAND THAT MISREPRESENTATION MAY RESULT IN DENIAL, REVOCATION, CANCELLATION, OR SUSPENSION OF THE VIRGINIA LICENSE.

Applicant's Signature _____ Date _____

APPLICATION FOR LICENSE RENEWAL
Individualized Renewal Record
 (Page 2 of 3)

Name: Last _____ First _____ Middle _____ License Number or SSN _____

Part IV-Individualized Renewal Record

Summary of Points Earned During the Past Five Years to be Credited Toward Renewal:

Option Maximum Points	1 (180)	2 (45)	3 (90)	4 (90)	5 (90)	6 (90)	7 (90)	8 (180)	Credit for All Options
Total Points									

Required for individuals employed by a Virginia educational agency:

Division or Accredited Nonpublic School _____

Advisor's Name (Please print) _____ Title _____

Advisor's Signature _____ Date _____

I recommend the renewal of the Virginia license and certify that the above-named license holder completed the listed activities and that these activities comply with Virginia's renewal regulations.

Superintendent's or Designee's Name (Please print) _____ Title _____

Superintendent's or Designee's Signature _____ Date _____

Exception to content coursework requirement granted? Yes ___ No ___

Reason: Particular need of teacher ___ New endorsement ___

		Verification of Completed Activities			
		Activity Points	Applicant Initials	Advisor Initials	Date
Option 1: College Credit (180)					
Course No./Title	College/Year Taken				
Option 2: Professional Conference (45)					
Conference Name	Dates Attended				
Option 3: Curriculum Development (90)					
Title	Dates				
Option 4: Publication of Article (90)					
Title Magazine	Date Published				

Individualized Renewal Record
(Page 3 of 3)

Name: Last First Middle License Number or SSN

	Verification of Completed Activities			
	Activity Points	Applicant Initials	Advisor Initials	Date
Option 5: Publication of Book (90) Title Publisher Date Published				
Option 6: Mentorship/Supervision (90) Person Date Supervised				
Option 7: Educational Project (90) Title Dates				
Option 8: Professional Development Activities (180) Project/Title Dates				