



For best results, any PDF form should be downloaded and opened in Acrobat Reader rather than filled out in the browser.

SECTION I - APPLICANT INFORMATION <i>To be completed by the applicant.</i>			
Legal First Name	Legal M.I.	Legal Last Name	DPI Entity Number
Applicant Email Address		Anticipated License	Student ID Number <i>If applicable</i>
Name of Employing School District			School Year Requested 20 - 20

SECTION II - EDUCATOR PREPARATION PROGRAM INFORMATION <i>Completed By Certification Officer</i>

I, THE CERTIFICATION OFFICER, CONFIRM that the above-named applicant has done one of the following during the term of the last one-year license with stipulations but by no later than August 31 of the calendar year in which the license expires:

- a. Completed six semester credits or the equivalent in in an approved educator preparation program that leads to the following license:


- b. Completed all coursework in an approved educator preparation program but must complete non-coursework requirement(s) and has made attempts to fulfill the outstanding requirement(s) on the dates indicated. Approved educator Preparation Program that leads to the following license:

Date coursework completed: _____

Outstanding Non-Coursework Requirement(s) _____

Date(s) of Attempt(s) _____

- c. Criteria a or b were not met. Provide a factual statement to explain the candidate's enrollment status, licensure program, and anticipated program progress for the requested school year.

SIGNATURE		
Name of Certifying Officer <i>Type/Print Clearly</i>	Institution Name	
Email Address	City	State
Signature of Certifying Officer 		Date Signed <i>Mo./Day/Yr.</i>