



Wisconsin Department of Public Instruction  
**SUBSTITUTE TEACHER EDUCATOR  
 PREPARATION PROGRAM VERIFICATION**  
 PI-1975 (02-26)

Telephone: 608-266-1027 or 800-266-1027

Application directions for [Short Term Substitute License EPP Verified](#).

Forms are available on [Department of Public Instruction website](#).

**Instructions for the Applicant:** Complete Section I below. Have the Educator Preparation Program (EPP) complete Section II and Section III of the form with signature. Then upload the completed form into your online application.

**Instructions for Educator Preparation Program:** Complete Section II and Section III below, sign, and return to applicant.

**SECTION I. APPLICANT INFORMATION**

Legal Name *Last, First, Middle*

Other / Previous Names

**SECTION II. SUBSTITUTE TEACHER  
 EPP VERIFICATION**

- The applicant listed above in Section I has completed all the following requirements, listed below:
- Individual is at least 20 years of age.
  - Individual is enrolled in a teacher preparatory program approved by the state superintendent.
  - If the teacher preparatory program in which the individual is enrolled awards a bachelor's degree, the individual has successfully completed the minimum number of credits to have achieved junior level status.
  - The Individual has completed 15-hours of classroom observation.

Date of EPP Verification

**SECTION III. EDUCATOR PREPARATION  
 PROGRAM INFORMATION**

Educator Preparation Program

Name of Certifying Officer (Printed) *First and Last Name*

Email Address of Certifying Officer

**SIGNATURE**

**I, THE CERTIFYING OFFICER, ATTEST** that the educator listed above has completed all requirements.

Signature of Certifying Officer

Date Signed *Mo./Day/Yr.*

