

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 2016

**APPLICATION FOR LICENSE RENEWAL**  
**Individualized Renewal Record (All three pages must be submitted.)**

Please submit a complete application with supporting credentials. The renewal fee is \$25. A \$50 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>Date of Birth</u>	<u>License No. or Social Security No.</u>
<u>Home Address*</u>		<u>City</u>	<u>State</u>	<u>Zip Code</u>
<u>Daytime Telephone Number (include area code)</u> ( )		<u>Home Telephone Number (include area code)</u> ( )		
<u>Endorsement(s)</u>	<u>Highest Degree Earned</u>		<u>Renewal Year</u>	
<u>Virginia employing school division or accredited nonpublic school (if applicable)</u>				

\*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**  
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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 \_\_\_\_\_

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

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Name: Last First Middle

License Number or SSN

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