



Office of Professional Preparation
 Building 6, Room 252
 1900 Kanawha Boulevard East
 Charleston, WV 25305
 304-558-7010 4/30/12

Applicant Information Page

Date Received by County Board of Education: _____

Date Received by Institution of Higher Education: _____

Part 1 -Applicant Information

Social Security Number	Birth Date (MM-DD-YYYY)	Gender (M or F)	US Citizen (YES or NO)	Served in US Armed Forces (YES or NO)
Last Name _____ First Name _____ MI _____ Previous Last Name (Maiden) _____ (If your name has changed since your last application, proof of name change must be attached e.g. photocopy of marriage certificate, etc.)				
Street Address _____		City _____	State _____	Zip Code _____
Primary Phone _____	Secondary Phone _____	E-Mail _____		

List the institutions from which a degree has been earned			Are you currently employed by a West Virginia School System?		Do you currently hold a License to work in the public schools of West Virginia?	
College/University	Degree	Date	Yes	No	Yes	No
			If YES, please indicate the school system:		Do you currently hold a License to work in the public schools of another state?	
					Yes	No

Part 3—Applicant Signature

I swear or affirm under the penalty of false swearing that all information provided in or with this application is true, correct, and complete to the best of my knowledge. I understand that any false statements, misrepresentations, or omissions of fact in or with this application are grounds for denial, suspension, or revocation of the license(s) that I am seeking or currently hold.

Signature of Applicant _____ Date _____

A \$25 non-refundable fee required payable to WVDE for each application. Applications attached: Form # _____ Form # _____ Form # _____	Supporting documentation attached: (non-fee required Forms, e.g. Forms 4B, 7, V10, V16) Form # _____ Form # _____ Form # _____
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Part 4—Fingerprinting Information

First-time applicants are required to have fingerprints processed by L-1 Solutions (L1enrollment.com).

I have previously received Certification in WV and understand that I do not need to re-submit my fingerprints.

I have never held WV Certification and have recently submitted my fingerprints to L1 Solutions on ____/____/____
 (L1 Transaction # _____)

Part 5 - Superintendent Recommendation (Required if employed in a WV School System)

I certify that I have reviewed and can attest to the accuracy and truthfulness of the information provided in this application. When necessary, I have included documentation verifying this information. I have reviewed the disclosure of background information, and, to the best of my knowledge, the applicant is of good moral character and is physically, mentally, and emotionally qualified to perform the duties of a teacher. I recommend that s/he be granted certification.

Signature of Superintendent _____ County _____ Date _____

Part 2-Disclosure of Background Information

If you answer yes to any question below, SUBMIT a narrative with your application. The narrative should include dates, locations, school systems, and all/any other information that explains the circumstance(s) in detail.	YES	NO	Documentation Attached
1) Have you ever had adverse action taken against any application, certificate, or license in any state? Adverse action includes but is not limited to the following: letter of warning, reprimand, denial, suspension, revocation, voluntary surrender or cancellation.			
2) Have you ever been disciplined, reprimanded, suspended, or discharged from any employment because of allegations of misconduct?			
3) Have you ever resigned, entered into a settlement agreement, or otherwise left employment as a result of alleged misconduct?			
4) Is any action now pending against you for alleged misconduct in any school district, court, or before any educator licensing agency?			
5) Have you ever been arrested, charged with, convicted of, or are currently under indictment for a felony? *			
6) Have you ever been arrested, charged with or convicted of a misdemeanor? (For the purpose of this application, minor traffic violations should not be reported) Charges or convictions for driving while intoxicated (DWI) or driving under the influence of alcohol or other drugs (DUI) must be reported. *			

* For a YES response to items 5 & 6, the following must be included for all charges, including those that have been dismissed or expunged: 1) Judgment Order; **OR** 2) Final Order; **OR** 3) Magistrate Court Documentation; **AND** 4) all other relevant court documentation.



REV 20110701

Form 20T—Initial Professional Teaching

Social Security Number: _____

Last Name: _____ First Name: _____ MI: _____

Applicant

I am applying for licensure based on:

- (1) Completion of WVBE approved educational personnel preparation program through a West Virginia institution of higher education.
- (2) Completion of an approved educational personnel preparation program through a regionally accredited out-of-state institution.
- (3) Possession of a valid license issued by a state other than West Virginia based upon completion of a teacher education program through a regionally accredited institution of higher education.

All applications must include Applicant Information Page, official transcripts, appropriate processing fees, and signed fingerprint card (if applicable) in addition to:

Option 1—Institutional official must complete the remainder of the application verifying completion of WVBE approved program.

Option 2—Institutional official must complete the remainder of the application verifying completion of approved program.

Option 3—Application must include a copy of the valid out-of-state certificate (both front and back) and a description of the course(s) you are eligible to teach.

Institutional Recommendation

Please verify completion of the following:

Pre-Professional Skills

- Computer Literacy Listening Speaking

WVBE Required Tests (Refer to WVBE Policy 5202 Appendix B for complete listing)

- PPST Series -OR-
 Applicant qualifies for exemptions stated in WVBE Policy 5202 §126-136-10.1.2.c(F) -AND-
 Praxis II Content Test -AND- Praxis II—PLT

Applicant GPA

- Applicant's GPA is 2.5 or higher

Field Experiences & Performance Assessment

- The applicant successfully completed appropriate field experiences & his/her performance was assessed in the following settings:

Content Specializations	Grade Level(s)	Name of Public School

Applicant completed programs leading to endorsement(s) in the following area(s):

Endorsement	Grade Levels	Endorsement	Grade Levels

I swear or affirm under the penalty of perjury that all information provided in or with this application is true, correct, and complete to the best of my knowledge. I understand that any false statements, misrepresentations, or omissions of fact in or with this application are grounds for denial, suspension, or revocation of the license(s) that I am seeking.

Signature of Applicant _____

Date _____

I have reviewed the disclosure of background information, and, to the best of my knowledge, the applicant is of good moral character and physically, mentally, and emotionally qualified to perform the duties of teacher. To the best of my knowledge, the applicant has disclosed information regarding any criminal conviction or currently pending charged felony or misdemeanor. I recommend that s/he be granted certification based on completion of the institution state approved program.

Signature of Institution Official _____

Institution _____

Date _____