



Office of Professional Preparation
 Building 6, Room 722
 1900 Kanawha Boulevard East
 Charleston, WV 25305
 304-558-7010 7/01/14

Applicant Information Page

Date Received by County Board of Education: _____

Date Received by Institution of Higher Education: _____

Check if applicable:

- Self or spouse on Active Duty
 Self or spouse within 6 months after Active Duty

See our website for additional documents required.

Part 1 -Applicant Information

Social Security Number _____ Birth Date (MM-DD-YYYY) _____ Gender (M or F) _____ US Citizen (Y or N) _____ US Veteran or Spouse of veteran (Y or N) If Yes complete box -top right _____
 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 non-refundable fee is required for each application. You may pay online at <https://wveis.k12.wv.us/certpayment/>. Applications attached:

Supporting documentation attached:
 (non-fee required Forms, e.g. Forms 4B, 7, V10, V16)

Form # _____ Form # _____ Form # _____
 Form # _____ Form # _____ Form # _____

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.

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. *

| YES | NO | Documentation Attached |
|-----|----|------------------------|
| | | |
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* 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 20160908

Form 8 C—Additional Endorsement with Praxis Only

Social Security Number: _____

Last Name: _____ First Name: _____ MI: _____

Applicant's Request

If requesting an additional endorsement based upon successful completion of the appropriate Praxis II exam(s)—as indicated in Policy 5202 Appendix B—the applicant must hold a valid Professional Teaching Certificate to be eligible to add teaching endorsements or a Professional Administrative Certificate to be eligible to add administrative endorsements.

When no Praxis exam is required/available or there are other requirements under Policy 5202, the applicant must complete an approved program and submit a Form 8.

Endorsements added with a passing Praxis are NOT applicable to Section 21.1.b Additional Endorsement(s) for Existing License: Section 10.1.b.3.F.2 Content Specialization, Section 10.1.b.3.J, and Section 14-Waivers

If employed in a WV school system, the application should be returned to the county superintendent (or designee) for his/her signature prior to submitting it to the WVDE.

Additional Endorsement

I request an additional endorsement and have listed the area or areas in which I am eligible. I have provided a copy of my appropriate Praxis II exam(s) and TREE¹ (if applicable).

Please list any endorsements for which this applicant is eligible and the corresponding programmatic level below.

| | |
|--|---------------------------|
| <input type="checkbox"/> I hold a valid West Virginia Professional Teaching Certificate <input type="checkbox"/> I hold a valid West Virginia Professional Administrative Certificate | |
| Requested Endorsement Area(s)** to be added | Programmatic Level |
| | |
| | |
| | |
| | |

Please submit the following for all requests made on the Form 8 C:

- 1) Copy score report of your appropriate content exam(s).**
- 2) Signature of County Superintendent, OR Form 4B, AND**
- 3) Applicant Information Page.**
- 4) Applicable processing fee. (Processing fees may be paid online at <https://wveis.k12.wv.us/certpayment/>.)**

¹If an applicant holds a valid secondary level WV Professional Teaching Certificate only, they must also pass the Teaching Reading Elementary Education (TREE) 5203 and the appropriate Praxis II exams to add Elementary Education K – 6.