



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 (Y or N) _____ US Veteran or Spouse of Veteran (Y or N) _____

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)

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/RESA Director/Multi-County/OIEP _____ County/RESA/Multi-County Center/OIEP _____ 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

* 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.



Form V9—First-Class/Full-Time CTE or Substitute CTE Permit

Social Security Number: _____

Last Name: _____ First Name: _____ MI: _____

Applicant's Request for CTE Permit	Employing Entity's Verification of Employment	WVUIT Official Recommendation
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First-Class/Full-Time CTE Permit

I am applying for:

- Initial First-Class/Full-Time CTE Permit
 - Renewal of First-Class/Full-Time CTE Permit
- Name of the institution where you expect to complete requirements for specializations:

By Signing this Agreement:

- A) I am making a formal commitment to complete the state-approved educational preparation program at the institution named above.
- B) I agree to furnish this institution with official seal-bearing transcripts from all of the institutions I have attended.
- C) I understand that I must complete at least six semester hours of credit with a minimum 3.0 GPA each year to renew my permit.
- D) I understand that I must satisfy all course and testing requirements for the CTE license in this specialization(s) within five (5) years from the date of issuance of the original First-Class/Full-Time Permit.

Request for Licensure:

- Initial First-Class/Full-Time CTE Permit
- Renewal of First-Class/Full-Time CTE Permit

Official Board Employment Date:

_____ (Employment Date)

Endorsement(s) Requested (5-AD)

_____ (Code #) _____ (Endorsement)

_____ (Code #) _____ (Endorsement)

Initial First-Class/Full-Time Permit

- I certify the applicant has enrolled or submitted a professional commitment with the intent of enrolling in the approved career and technical education program for the endorsement(s) requested.

Renewal of the First-Class/Full-Time CTE Permit

- I certify that the applicant has completed six semester hours of renewal credit with at least a 3.0 GPA. The credits are within the approved program for the Professional Certificate and in accordance with the applicant's endorsement/assignment.

Note: WVUIT Official Recommendation is not required for the Substitute CTE Permit.

Substitute CTE Permit

I am applying for:

- Initial Career and Technical Education Substitute Permit
- Renewal of the Career and Technical Education Substitute Permit

Request for CTE Substitute Permit:

- Official Board Employment Date:** _____
- Original Career/Technical Substitute Permit—18 clock hours of training completed on : _____
 - Renewal of Career/Technical Substitute Permit—12 hours of training completed on: _____

_____ (Code #) _____ (Endorsement) _____ (Code #) _____ (Endorsement)

Term	Course Number & Title	Grade	Hours

Signatures

I understand that it is my responsibility to meet all requirements for:

- First-Class/Full-Time Career and Technical Education Permit
- Substitute Career and Technical Education Permit

I verify that the applicant is the most qualified candidate for the position. I have informed the applicant that (s)he must satisfy renewal requirements as specified in the WVDE Policy 5202 or (s)he will not be eligible for reassignment to this position.

Signature of WVU Institute of Technology Career and Technology Education Department Chair.

Signature of Applicant _____ Date _____

Signature of Superintendent or Director _____ Date _____

_____ Date _____