



Form V15—Adult License for Adult fBasic Education

Social Security Number: _____

Last Name: _____ First: _____ MI: _____

Employing County, RESA, Multi-County Center or OIEP

Option 1— Initial Adult License for Adult Basic Education

The applicant has been employed and is recommended for certification

Date of Employment : _____

The applicant has included a copy of their official transcripts with a bachelor’s degree and minimum 2.5 GPA.

Option 2— Renewal Adult License for Adult Basic Education (select one option)

Option 1: The applicant has provided official transcripts reflecting six (6) semester hours of approved coursework with a minimum 3.0 GPA, fY’UH’X’hc’H’Y’di V’]W gWcc’`dfc[fUa `cf`]b`U`dfc[fUa `cZUXi `hYXi W]hcb **OR**

Option 2: The applicant has reached age 60 and attached a copy of their birth certificate as proof to this application

AND The applicant has completed all required Adult Basic Education Professional Development Activities and documentation is on file with their employer (required for both options).

Date In-Service was completed (required) _____

Signature
