



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 V15—Adult License for Adult Basic 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, prescribed for issuance of a Professional Teaching Certificate or in a program of Adult Education **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) _____

Note: The Office of Adult Education and Workforce Development **must** provide approval (via e-mail or authorized official signature) of professional development activities as part of the application review process at the WVDE before an application may be approved.

Signature

Signature of Superintendent, RESA Director, Multi-County Director or OIEP Director

Date _____