Office of Certification Building 6, Suite 550 1900 Kanawha Boulevard, East Charleston, WV 25305 (304)558-7010



1. Applicant Information			2. Disclosure of Background Information				
Social Security Number Birth Date (MM-DD-YYYY)	Prefer Not to Answer		Military Service: ☐ US Veteran or ☐ Spouse of US Veteran	If you answer yes to any question below, submit a narrative with your application. The narrative should include dates, locations, school systems, and any/all other information that explains the circumstance(s) in detail.	YES	ON	Previously Submitted
Last Name Firs (If your name has changed since your last applied) Street Address	cation, proof of name change must be att	tached, e.g. copy of marria	Zip Code	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.			
Primary Phone				Have you ever been disciplined, reprimanded, suspended, or			
Email (Required) Are you employed by a West Virginia School Sys		discharged from any employment because of allegations of miscon- duct?					
Indi	icate Race and Ethnicity (Check all th	hat apply)		3) Have you ever resigned, entered into a settlement agreement, or			
Hispanic	☐ White ☐ Asian	■ Black/Afric	can American	otherwise left employment as a result of alleged misconduct?			
☐ Middle Eastern/North African (MENA)	☐ American Indian/Alaskan Native 3. Applicant Signature	■ Native Hawaiian/C	Other Pacific Islander	4) Is any action now pending against you for alleged misconduct in any school district, court, or be-			
		fore any educator licensing agency?	\longmapsto				
I swear or affirm under the penalty of false sw best of my knowledge. I understand that any fa denial, suspension, or revocation of the license,	5) Have you ever been arrested, charged with, convicted of, or are currently under indictment for a felony?*						
ANV INTOTTIALION SUDMILLEU UL ULI TELUTU MAV DE	== === our privacy policy los	an aur wahaita	6) Have you ever been arrested, charged with, or convicted of a misdemeanor? (For the purpose of	oxdot			
	rópen to public inspection and/or publication a	as per our privacy policy lo	cated on our website.	charged with, or convicted of a misdemeanor? (For the purpose of			
Signature of Applicant	open to public inspection and/or publication of	as per our privacy policy lo	cated on our website. Date	charged with, or convicted of a misdemeanor? (For the purpose of this application, minor traffic viola- tions should not be reported.)			
	4. Fingerprinting Informatio	as per our privacy policy loc	cated on our website.	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			
	4. Fingerprinting Informatio	as per our privacy policy loc		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			
Signature of Applicant Fingerprinting instructions at https://wvd	4. Fingerprinting Informatio de.us/certification/certification-info/app	on plication-forms/first-tim		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			
Signature of Applicant Fingerprinting instructions at https://wvd	4. Fingerprinting Informatio de.us/certification/certification-info/app V. complete at background through IdentoGo. All	on Il firsttime applicants must	Date ne-application/ have fingerprints processed	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 and 6 included for all charges, including the	6, the fo	ollowing r ∵have be	must be en dis-
Fingerprinting instructions at https://wvd I have previously received Certification in WV I have never held WV Certification and will coby IdentoGo (https://www.identogo.com). A fine	4. Fingerprinting Informatio de.us/certification/certification-info/app V. complete at background through IdentoGo. All	on Il first-time application is reall once the application is really the second on the application is really the second on the second	Date ne-application/ have fingerprints processed received by the WVDE.	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 and 6 included for all charges, including the missed:	ose that	t have be	must be een dis-
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REV 7.22.2021

Form 1T—Restricted Pre-Professional Certificate

Social Security Number:		
Last Name	First Name:	MT:

Applicant	Employing County	Institution of Higher Education
Name of Institution where you completed the requirements for certification:	Employing County	
	Employing School	Institution of Higher Education
By Signing this Agreement: A) I am making a formal commitment to successfully complete the required PRAXIS Exam to receive my certification.	Endorsement/Grade Range Required	Endorsement/Grade Range Completed
B) I understand that it is my responsibility to meet the requirements for certification and that this Pre-Professional Certificate is non-renewable.	Endorsement/Grade Range Required	
	Date Applicant Will Begin/Continue Assignment	
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.	position in which no certified applicant has applied and I have informed the applicant this certificate is non-renewable and they must satisfy PRAXIS requirements as specified in WVBE	I verify that the applicant has completed all course requirements of the approved program while employed under a First-Class/Full-Time Permit for the endorsement area requested but has not attained the required passing scores on the Praxis content exams.
Signature of Applicant	Signature of Superintendent	Signature of Institution Official
Date	Date	
		Date