

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



West Virginia DEPARTMENT OF
EDUCATION

1. Applicant Information

Social Security Number _____ Gender: Check One Male Female Prefer Not to Answer
 US Citizen: Yes No
 Military Service: US Veteran or Spouse of US Veteran
 Birth Date (MM-DD-YYYY) _____

Last Name _____ First Name _____ MI _____ Previous Last Name (or Maiden) _____
 (If your name has changed since your last application, **proof of name change must be attached**, e.g. copy of marriage certificate, etc.)

Street Address _____ City _____ State _____ Zip Code _____
 Primary Phone _____ Secondary Phone _____
 Email (Required) _____
 Are you employed by a West Virginia School System? (Circle Yes / No) If YES, please indicate the school system: _____

Indicate Race and Ethnicity (Check all that apply)

Hispanic White Asian Black/African American
 Middle Eastern/North African (MENA) American Indian/Alaskan Native Native Hawaiian/Other Pacific Islander

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. The WVDE collects personal and non-personal information. Any information submitted or on record may be open to public inspection and/or publication as per our privacy policy located on our website.

Signature of Applicant _____ Date _____

4. Fingerprinting Information

Fingerprinting instructions at <https://wvde.us/certification/certification-info/application-forms/first-time-application/>

I have previously received Certification in WV.
 I have never held WV Certification and will complete at background through IdentoGo. All first-time applicants must have fingerprints processed by IdentoGo (<https://www.identogo.com>). A fingerprint service code will be sent to your e-mail once the application is received by the WVDE.

5. Superintendent Recommendation (Required if employed by 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 assigned duties. I recommend that s/he be granted certification.

Signature of Superintendent/Multi-County CTE Administrator, or WVSdT Superintendent/designee _____ County _____ Date _____

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 any/all other information that explains the circumstance(s) in detail.	YES	NO	Previously Submitted
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.*			

*For a YES response to items 5 and 6, the following must be included for all charges, including those that have been dismissed:

- 1) Charging Document; and
- 2) Judgement Order; or
- 3) Final Disposition; and
- 4) All other relevant court documentation.



West Virginia DEPARTMENT OF
EDUCATION

REV 20210722

Form 20C — Conversion from a Provisional to a Professional Teaching Certificate

Social Security Number: _____

School District _____

Conversion Requirements (Circle Yes or No)

Y	N	The applicant has successfully completed a Beginning Educator Internship/Induction (Refer to W. Va. Code §18A-3C-3) for classroom teachers OR qualifies for exemption as stated in WVBE Policy 5202. Identified Exemption: _____																
Y	N	The applicant has completed successful evaluations for each year taught under the Provisional Professional Certificate within the West Virginia Educator Evaluation System, AND with an earned performance rating of emerging or above, pursuant to W. Va. Code §18A-2-12.																
Y	N	The applicant has completed two years of full-time teaching experience under the Provisional Professional Certificate AND in the area(s) of endorsement on such certificate in West Virginia. Identified Endorsement(s): _____ Required Experience Verification:																
		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 35%;">School</th> <th style="width: 15%;">Year(s)</th> <th style="width: 30%;">County/District</th> <th style="width: 20%;">Position</th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>	School	Year(s)	County/District	Position												
School	Year(s)	County/District	Position															
Y	N	The applicant has: 1) successfully completed the appropriate coursework (six semester hours of college/university coursework reflecting the minimum of 3.0 GPA, as applicable) related to the public school program as defined in §126-136-9.6.g, completed subsequent to the issuance of the initial Provisional Professional Certificate to be converted and within the last five years; OR 2) successfully completed e-learning coursework related to the public school program as defined in WVBE Policy 5202, completed subsequent to the issuance of the initial Provisional Professional Certificate to be converted and within the last five years. For verification purposes, the application MUST either include a copy of official transcripts, OR include verification of e-learning course completion.																

I hereby certify and agree with the following statements: The applicant is employed within our school district, has met all requirements for conversion from the Provisional Teaching Certificate to the Initial Professional Teaching Certificate pursuant to WVBE Policy and West Virginia State Code, and I officially recommend that the applicant receive the requested certificate for the requested endorsement.

Signature of the Employing Superintendent

School District

Date