

Release of Information Form

Certification License #: _____



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

Applicant Information

Name

Current Mailing Address

Telephone Number

Date of Birth

License Number (Register or look-up your license number: <https://wveis.k12.wv.us/certportal/>)

Information you are requesting

Name and Address where information is to be mailed

X _____
Please sign at the X above to give the West Virginia Department of Education permission to release the requested information to the individual/institution listed above.

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Additional Information

The \$5.00 processing fee must be paid online at <https://wveis.k12.wv.us/certpayment/>

After online payment of the \$5.00 fee, send the release form **and** a copy of an **official government issued Photo ID** to the below mailing address, email address** or fax number.

If the \$5.00 fee and photo ID are not submitted, your request will be denied.

**The West Virginia Department of Education (WVDE) does not include social security numbers in email communications. If you select to submit this information via email, please note the WVDE is not responsible for the security of such email transmission as information could be intercepted/breached because of your network or email provider settings and/or protocols.

Mail Forms to:

West Virginia Department of Education
Office of Certification
Building 6, Room 500
1900 Kanawha Boulevard, East
Charleston, WV 25305

Email** to:

certification.wvde@k12.wv.us
Phone Number: 304-558-7010
Fax Number: 304-558-7843