

Form 9

Duplicate Certificate and Name/Address-Change Request 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

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

Email _____

Last Name

First Name

MI

Applicant's Request

☐ **Request Printed Copy of WV Certificate (Fee Required)**

I am requesting a printed official seal-bearing copy of my West Virginia Certificate issued by the West Virginia Department of Education.

☐ **Request Change of Name/Address (No Fee Required)**

I am requesting a change of name/address as it appears on my certificate issued by the WVDE. I have included verification of such changes (copy of social security cards, marriage certificate, driver's license, or government-issued ID). Updated certificates will only be available online as a PDF unless Option 1 is also selected, and the processing fee is included with the submitted Form 9.

Signatures

I swear or affirm under the penalty of perjury 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.

Applicant Signature

Date

The applicant information form must also be submitted with this form. The WVDE – Certification Payment System Link: <https://wveis.k12.wv.us/certpayment/>