

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) If Yes complete box -top right

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 the application. You may pay online at <https://wveis.k12.wv.us/certpayment/>. Applications attached:

| | | | | | |
|--------|--------|--------|---|--------|--------|
| _____ | _____ | _____ | No fee is required 24A and supporting documentation attached: (non-fee required Forms, e.g. Forms 24A, 4B, 7) | | |
| Form # | Form # | Form # | Form # | Form # | Form # |

Part 4—Fingerprinting Information

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

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 will submit my fingerprints to IdentoGo. All first-time applicants must have fingerprints processed by IdentoGo (L1enrollment.com). A fingerprint service code will be sent to your e-mail once the application is received.

Part 5 - Signature of Higher Education Representative (required)

To the best of my knowledge, the applicant is of good moral character and physically, mentally, and emotionally qualified to perform the duties of a teacher, administrator, or student support personnel.

Signature of college/University Official Institution 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.

| | YES | NO | Documentation Attached |
|--|-----|----|------------------------|
| 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 & 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.

20210722

Form 24R— Long-Term/Short-Term Residency Permit

Social Security Number: _____

Last Name: _____ First Name: _____ MI: _____

Part I: IHE Certification Officer Verification

Name of IHE

Applicant's Endorsement Area Grade Level

Experience Placement Dates

WV County of Placement

Name of WV Public School Placement

Name of WV Non-Public School Placement

Student Teacher IHE Supervisor

IHE Supervisor's Telephone Number

IHE Supervisor's Email

Cooperating Teacher Years of Experience

****If the applicant has not successfully completed the required content exam(s), they must submit a Form 24A with evidence of successful completion of the required content exams to convert to a Long-Term Residency Permit.**

****A Short-Term Residency Permit cannot be used beyond the first semester of the yearlong residency, nor does it allow a candidate to be a substitute teacher.**

Part 2 –IHE and School District/School Verifications

The applicant has met the following requirements as per WVBE Policy to receive a Yearlong Residency Permit:
 ___ YES ___ NO Core Academics Skills for Educators Exam (CASE)

OR

The applicant is exempt from the Core Academic Skills for Educators Exam (CASE) based on one or more of the following:

___ SAT Score ___ ACT Score ___ GRE Score ___ Holds a Master's Degree or Higher
 ___ Currently seeking a Master's Degree in teaching, administration, or student support
 ___ Other Other Exemption: _____

AND

___ YES ___ NO Successfully completed the PRAXIS II Content Exam as per WVBE Policy
****If No, applicant will receive a Short-Term Residency Permit.****

Anticipated Yearlong Residency Placement

| Content Specializations | Grade Level(s) | Name of School |
|-------------------------|----------------|----------------|
| | | |
| | | |
| | | |

I certify that I have reviewed and can attest to the accuracy and truthfulness of the information provided in this application and I have included documentation verifying this information when necessary. I recommend that she/he be allowed to complete the above requested placement based on having met all necessary placement requirements.

Signature of Superintendent, Multi-County Center County/Multi-County Center/WVSDT Center Date
or WVSDT Superintendent

I certify that I have reviewed and can attest to the accuracy and truthfulness of the information provided in this application and I have included documentation verifying this information when necessary. I recommend that she/he be allowed to complete the above-requested placement based on having met all necessary WVBE policy and program requirements.

IHE Signature _____ Date: _____