



Applicant Information Page

Date Received by County Board of Education: _____

Date Received by Institution of Higher Education: _____

Certification Services
Building 6, Suite 550
1900 Kanawha Boulevard, East
Charleston, WV 25305
304-558-7010
7.22.2021

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) _____

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

College/University	Degree	Date

Are you currently employed by a West Virginia School System?

Yes No

If YES, please indicate the school system:

Do you currently hold a License to work in the public schools of West Virginia?

Yes No

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 each application. Please pay online at <https://wveis.k12.wv.us/certpayment/>. Applications attached:

Supporting documentation attached:
(non-fee required Forms, e.g. Forms 4B, 7, V10, V16)

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 - Superintendent Recommendation (Required if employed in 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 duties of a teacher. I recommend that s/he be granted certification.

Signature of Superintendent, Multi-County Center or ODTP Director _____

County/Multi-County Center/ODTP _____

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.



West Virginia DEPARTMENT OF
EDUCATION

REV 20210722

Form V7A—Career Technical Certification (Out of State)

Social Security Number: _____

Last Name: _____ First Name: _____ MI: _____

Applicant's Request for a Certificate (select one only)

I am requesting a Temporary Career and Technical Education Certificate (may lack either the industry required credentials or the NOCTI exam scores, if applicable) and have been offered employment within a West Virginia school system.

I am requesting an Initial Career and Technical Education Certificate

Requirement Verification for the Initial Career and Technical Education Certificate and the Temporary Career and Technical Education Certificate

I hold a valid out-of-state Career and Technical Education Certificate in the following specializations requested (see attached certificate copy):

_____, _____, _____

I hold three years of successful out-of-state experience as an educator in the requested specialization(s) within the seven year period preceding the date of this application as detailed in the list below and verified by the attached form V10.

	Specialization	School	State	Teaching Experience Employment Dates
Year 1				
Year 2				
Year 3				

Requirement Verification for the Initial Career and Technical Education Certificate

I hold the required industry recognized credential(s) (Career and Technical Education Endorsements and Testing Manual) **OR** identify as N/A

I hold passing scores on the required NOCTI exam(s) (Career and Technical Education Endorsements and Testing Manual) **OR** identify as N/A

Applicant Signature

I swear or affirm under 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.

Applicant Signature

Date

Authorized Official's Signature Verifying Offer of Employment (Required for Temporary CTE Certificate Only)

Superintendent, Multi-County Center or ODTP Director Signature

Date