

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						Part 2-Disclosure of Background Information				
Social Security Number Last Name (If your name has changed si	Birth Date (MM-DD-YYYY) First Name ince your last application, proof				US Veteran or Spouse Name (Maiden) of marriage certifica		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.	S	ON	Documentation Attached
Street Address Primary Phone List the institutions				tly employed by School System?	State Zip Code Do you currently hold a License to work in the public schools of West Virginia? Yes No		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.			
College/University	Degree	Date	Yes If YES, please school s	No e indicate the system:	Do you currently h work in the public other state?	No nold a License to c schools of an- No	2) Have you ever been disciplined, reprimanded, suspended, or discharged from any employment because of allegations of misconduct? 3) Have you ever resigned, entered			
Toward and the same	Par	f must be souled as a T	into a settlement agreement, or oth- erwise left employment as a result of alleged misconduct?							
I swear or affirm under the pena understand that any false statem that I am seeking or currently how	4) Is any action now pending against you for alleged misconduct in any school district, court, or before any educator licensing agency?									
Signature of Applicant A non-refundable fee is require at https://wveis.k12.wv.us/ce	Date Supporting documentation attached: (non-fee required Forms, e.g. Forms 4B, 7, V10, V16)				5) Have you ever been arrested, charged with, convicted of, or are currently under indictment for a felony? *					
Form #	Form # Form #		Form #	Form i	# Form	#	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. *			
Part 4 - 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.							those that have been dismissed	narges, or exp der; O	, inclu punged)R 3) N	ıding d: 1) Mag-
Signature of Superintendent		County		Date						



REV 20210722

Form V7R—Career Technical Certification Renewal or Permanent

Social Security Number:		
Last Name:	First Name:	MI:

Part 1 — Applicant											
Select the appropriate action below to apply for renewal of a career and technical certificate OR a permanent career and technical certificate.											
Renewal of CTE Certificate			Permanent CTE Certificate								
Part 2 — Employing County, Multi-County Center or ODTP											
Endorsement # Name of the Endorsement	Grades										
Endorsement # Name of the Endorsement		Grades									
Renewal of CTE Certificate (Select only one of the following option	ns)	Permanent CTE Certificate (Select only one of the following options)									
Possess both a master's degree and MA +30 Salary Classifica OR	ation	of ten ye	The applicant has held a 5 year certificate two times (for a total of ten years) by successfully renewing it once and is now								
Age 60 (requires copy of birth certificate or government issue documentation for verification) OR	ed	applying based upon meeting eligibility for a second rene criteria for renewal of CTE Certificate) OR									
Completed six semester hours of coursework related to the pushed school program with a minimum 3.0 GPA or successfully coned the required amount of WVDE E-Learning coursework. Cowork must have been completed within five years of the applition date. Identify the courses in the chart below.	mplet- ourse-	The applicant holds a master's degree related to the public school program and holds or is eligible for the five year certificate and has five years educational experience with two in the requested endorsement area. Note: Teaching experience must be verified by Form V10									
When applying for certificate renewal or a permanent certificate based upo	on comp	oletion of required co	ursework, use the following chart to identify the coursework.								
Option 1 : Six semester hours of coursework related to the public school program with a minimum 3.0 GPA in each course	Option 2 : Successful completion of the required amount of WVDE E-Learning coursework (two courses)										
Option 3: A combination of three semester hours related to the public	school	program with a mir	nimum 3.0 GPA and one WVDE E-Learning course.								
Term Course Number & Title Grade Ho	ours	Completion Date	Course Title								
Official seal-bearing transcripts must be included.	Official WVDE E-Learning certificates must be included to verify successful completion.										

Note: A valid industry credential is required for renewal, if applicable to the requested endorsement area(s) as identified in the CTE Endorsements and Testing Manual.