



Tennessee Department of Education – Office of Educator Licensing

710 James Robertson Parkway - Andrew Johnson Tower, 12th Floor - Nashville, TN 37243

The information on this page must accompany any request for licensure transactions in the State of Tennessee. Please complete using black ink. Required items are identified with an asterisk (*). The personal affirmation section must be completed.

SECTION 1. CONTACT AND DEMOGRAPHIC INFORMATION

This section must be completed. Please be certain to provide accurate information.

Form with fields for First Name, Middle Name, Last Name, Date of Birth, Street/P.O. Box, City, State, Zip Code, Primary Telephone Number, Secondary Telephone Number, Social Security Number, Primary Email Address, and Secondary Email Address.

The following information is collected for the purposes of federal reporting requirements. Please provide responses for ethnicity, race and gender.

- 1. Ethnicity – Choose one
2. Race – Mark all that apply
3. Gender

SECTION 2. PERSONAL AFFIRMATION*

This section must be completed. False statements made in this application may constitute grounds to take action, revoke or deny a license. Check the appropriate response for each question. Do not include matters that the State Board of Education has previously investigated and found "No Probable Cause" to take any disciplinary action.

- 1. Have you been convicted of a felony, including conviction on a plea of guilty, a plea of nolo contendere or granting pre-trial diversion?
2. Have you ever been convicted of the illegal possession of drugs, including conviction on a plea of guilty, a plea of nolo contendere or an order granting pre-trial diversion?
3. Have you had a teacher's certificate/license revoked, suspended or denied, or have you voluntarily relinquished a certificate/license. (Allowing a license to expire does not apply.)
4. Is there any action pending against your certification/license or application in another state?

- If you have answered "Yes" to question 1 or 2, please attach details of conviction, include date and location of conviction, and court certified copies of the judgment, conviction, and sentencing.
If you have answered "Yes" to question 3 or 4, please attach details naming the state and/or issuing authority and explain the circumstances.

SECTION 3. SIGNATURE AND DATE

This section must be completed.

Applicant Signature Date

SECTION 4. LICENSURE TRANSACTION REQUESTED

Please indicate the type(s) of licensure transaction(s) being requested. Mark all that apply.

Initial Licensure Licensure Advancement Licensure Renewal Reactivating an Inactive License Waiver or Permit Additional Endorsement JROTC International Teacher Exchange License Other:

APPLICATION FOR RENEWAL OF APPRENTICE, OUT OF STATE, SPECIAL GROUP LICENSES

ALL DOCUMENTS SUBMITTED TO THE OFFICE OF EDUCATOR LICENSING BECOME THE PROPERTY OF THE STATE DEPARTMENT OF EDUCATION AND WILL NOT BE RETURNED TO THE APPLICANT NOR WILL THE DEPARTMENT PROVIDE COPIES OF DOCUMENTS TO THE APPLICANT OR THIRD PARTIES.

INCOMPLETE APPLICATIONS WILL BE RETURNED TO THE APPLICANT

RENEWAL OPTIONS

OPTION A

Apprentice level license holders who hold an advanced degree and have accrued three (3) years acceptable educator experience within the five (5) year validity period of license.

(ex: validity period may be 2009-2014)

EDUCATORS DESIRING RENEWAL USING ADVANCED DEGREE AND EXPERIENCE

Check appropriate block(s)

All experience has been accrued in a Tennessee public school and on file in SDE (no documentation needed)

Experience accrued in a Tennessee public school not on file in SDE attached

OR

Experience verification form signed by Director of schools to verify at least three (3) years of educator experience in an approved private school or an out of state public school is attached

Link to experience verification form - www.tn.gov/education/lic/doc/ed2034a.pdf

OPTION B

Apprentice level license holders with less than an advanced degree OR an advanced degree with less than three (3) years acceptable educator experience within the five (5) year validity period of license.

(ex: validity period may be 2009-2014)

EFFECTIVE AUGUST 1, 2013

EDUCATORS DESIRING RENEWAL USING PROFESSIONAL DEVELOPMENT MUST SUBMIT VALIDATED DOCUMENTATION

Check appropriate block(s)

Employed in a Tennessee public school system

Completed computation sheet reflecting 45 renewal points attached (ALL APPLICANTS) ***NEW**

Part I of renewal computation sheet completed by both educator & supervisor

OR

Not employed in a Tennessee public school system (not employed, employed out of state, or employed a TN private school)

Part II of renewal computation sheet signed by educator

Link to renewal computation sheet - www.tn.gov/education/lic/doc/ed5342.pdf

Supporting documentation for each activity attended attached (certificates, CEU transcript, college transcript) (ALL APPLICANTS) ***NEW**