

*Virginia Department of Education
Department of Teacher Education and Licensure
PO Box 2120
Richmond, Virginia 23218-2120*

APPLICATION FOR A VIRGINIA TECHNICAL PROFESSIONAL LICENSE

Thank you for your interest in obtaining a Virginia Technical Professional License. Please follow the application instructions and return all completed information in a **single packet**. The application for a Technical Professional License must be submitted by a Virginia school division or Virginia accredited nonpublic school. Please submit your completed application packet directly to the appropriate individual in your school division or accredited nonpublic school.

If an incomplete application packet is submitted or a license cannot be issued, your application will be retained for only one year. After that time, a new application must be submitted. An updated application is required for a license to be issued.

CRITERIA FOR SUBMITTING AN APPLICATION FOR A VIRGINIA TECHNICAL PROFESSIONAL LICENSE

Please reference the [*Licensure Regulations for School Personnel*](#) on the Virginia Department of Education's website for all requirements for a license.

Employing Virginia school division and accredited nonpublic schools must ensure that applicants meet the criteria below:

- Is employed under contract by a Virginia school division or accredited nonpublic school as a technical professional educator and has the recommendation of the employing educational agency (please submit your completed application directly to the employing Virginia school division or accredited nonpublic school);
- Has met the requirements set forth in the *Licensure Regulations for School Personnel* for the license and endorsement;
- Has an industry certification credential (means a career and technical education credential that is earned by successfully completing a Virginia Board of Education-approved industry certification examination, being issued a state professional license, or successfully completing an occupational competency examination) in the area in which the teacher seeks endorsement; and
- Has completed all statutory requirements, including Child Abuse and Neglect Recognition and Intervention Training, Dyslexia Awareness Training, and Certification or Training in Emergency First Aid, CPR including hands-on practice, and the use of Automated External Defibrillators.

IMPORTANT NOTICE

The submission of an application for a Virginia license or request for license renewal may result in the denial of a license for any reason listed in the Licensure Regulations for School Personnel, 8 VAC20-23-750. The

INSTRUCTIONS FOR APPLYING FOR A VIRGINIA TECHNICAL PROFESSIONAL LICENSE

Please follow the instructions to assemble your application packet. Submit the application, including the forms and documents requested, in a single packet to your employing Virginia educational agency.

Step 1: Application Form

Please respond to all questions on the application form. SIGN AND DATE BOTH PAGES OF THE APPLICATION. Original signatures with a current date are required. **The applicant is responsible for notifying the Department of Teacher Education and Licensure in writing of mailing address changes.**

NOTICE: In accordance with § 63.2-1937 of the *Code of Virginia*, the Virginia Department of Education requires applicants for teacher licensure in Virginia to provide their social security numbers. Additionally, Virginia uses applicants' social security numbers to check the clearinghouse maintained by the National Association of State Directors of Teacher Education and Certification (NASDTEC) for license revocation, cancellation, suspension, denial, and reinstatement in other states. Virginia also reports information to the clearinghouse as needed. The Virginia Department of Education will not release your social security number except to the NASDTEC clearinghouse to report cases of license revocation, cancellation, suspension, denial, and reinstatement as noted above. Please note that if you do not provide your social security number, your application will not be processed and no Virginia teaching license will be issued.

NOTICE: The name and address of a person applying for or possessing a license may be disseminated pursuant to a request under Section 2.2-3802(5) of the *Code of Virginia*.

If you responded affirmatively to any of the questions in Part II of the application, a letter of explanation and requested documentation must be submitted.

Step 2: Nonrefundable Application Fee

The in-state fee is \$100, and the out-of-state fee is \$150. The fee is determined by the address on your application. Attach a certified check, cashier's check, money order, or personal check made payable to the *Treasurer of Virginia*. A \$50 processing fee is assessed for a check returned for any reason. Returned checks are subject to collection action. Applicants may also utilize the Pay Now feature on the Office of Licensure website to pay for the application fee upfront. Please note that if this option is utilized, the receipt must be **printed and submitted** with the application packet.

Step 3: Occupational/Professional License(s)

Attach a photocopy of each active occupational/professional license relative to the endorsement (teaching) area requested.

Step 4: Out-of-state Educational License(s)

Include a photocopy of each of your active out-of-state license(s), and any additional documentation received with the license(s), if applicable. If you completed an alternate route to licensure, please also submit that documentation.

Step 5: Industry Credentials for Teachers Seeking an Initial License with Endorsement(s) in an Area of Career and Technical Education

Individuals applying for an initial license with a career and technical education endorsement must include documentation verifying the industry credential statutory requirement has been met for the endorsement requested.

"Industry certification credential" means a career and technical education credential that is earned by successfully completing a Virginia Board of Education-approved industry certification examination, being issued a state professional license, or successfully completing an occupational competency examination. Please note that this requirement is in addition to all other licensure requirements for the endorsement you are seeking. For detailed information regarding 1) the teacher-eligible list of Board of Education-approved industry certification examinations, (2) the issuing organization, and (3) the specific career and technical (CTE) area(s), including the corresponding endorsement codes, refer to the Industry Credentials for Teachers Seeking an Initial Virginia License with Endorsement(s) in an Area of Career and Technical Education Guidance Document Word) (Revised June 2021), [Guidance Document](#) (Word).

The *Code of Virginia* requires that a teacher seeking an initial license in the Commonwealth with an endorsement in the area of career and technical education shall have an industry certification credential in the area in which the teacher seeks endorsement. If a teacher seeking an initial license in the Commonwealth has not attained an industry certification credential in the area in which the teacher seeks endorsement, the Board may, upon request of the Virginia employing school division or Virginia accredited nonpublic school, issue the teacher a provisional license to allow time for the teacher to attain such credential.

A provisional license may only be issued at the request of the Virginia employing school division or the Virginia accredited nonpublic school.

Step 6: Certification of Child Abuse and Neglect Recognition and Intervention Training

Include a copy of the certificate verifying completion of this statutory requirement. Individuals seeking initial licensure must complete study in child abuse and neglect recognition and intervention in accordance with curriculum guidelines approved by the Virginia Board of Education. A [training module](#) is available at no cost.

- Individuals must select the "Required Training/Courses" tab under the heading "Child Protective Services."
- Then select the "Child Abuse and Neglect: Recognizing, Reporting, & Responding (for educators)."

To print the certificate after completing the training, the computer must be connected to a printer.

Step 7: Emergency First Aid, CPR, and AED Training or Certification

Include documentation verifying this statutory requirement has been met. Every person seeking initial licensure or renewal of a license shall provide evidence of completion of certification or training in emergency first aid, cardiopulmonary resuscitation, and the use of automated external defibrillators. The certification or training program shall (i) be based on the current national evidence-based emergency cardiovascular care guidelines for cardiopulmonary resuscitation and the use of an automated external defibrillator, such as a program developed by the American Heart Association or the American Red Cross, and (ii) include hands-on practice of the skills necessary to perform cardiopulmonary resuscitation. The Board shall provide a waiver for this requirement for any person with a disability whose disability prohibits such person from completing the certification or training.

An individual requesting a waiver must submit a “[Request for a Waiver Form](#)”.

The following must be included on official documentation submitted to the licensure office by an individual:

- Individual’s full name.
- Title or description of training or certification completed that clearly indicates that all three components were included: 1) emergency first aid, 2) CPR and 3) use of AEDs.
- Date the training or certification was completed.
- Signature and title of the individual providing the training or certification or a printed certificate from the organization or group that provided the training or certification. Legible copies of wallet-sized certification cards or other sized certifications, containing the above information, from organizations providing current national evidence-based emergency cardiovascular care for cardiopulmonary resuscitation and the use of an automated external defibrillator, such as a program developed by the American Heart Association or the American Red Cross will be accepted.

Step 10: Dyslexia Awareness Training

Include a copy of the certificate verifying completion of this statutory requirement. Individuals seeking initial licensure shall complete awareness training on the indicators of dyslexia, as that term is defined by the Board pursuant to regulations, and the evidence-based interventions and accommodations for dyslexia. A [dyslexia module](#) is available at no cost.

To print the certificate after completing the training, the computer must be connected to a printer.

Step 11: Behavior Intervention and Support Training

Include a copy of the certificate verifying completion of this statutory requirement. Applicants who complete a Virginia state-approved program will have completed this as part of their program. A series of modules that meet the new training requirement for initial licensure can be found on the [ODU VDOE joint webpage](#) and can be completed at no cost. Applicants who did not receive the training through a Virginia state-approved program may complete the modules on their own and submit the documentation.

Step 12: Official Student Transcripts

Include official transcripts from all colleges and universities attended. Contact the registrar's office of each college or university where you have earned a degree or completed coursework. Official transcripts can be mailed to the student directly, however, the envelope must remain sealed. Official transcripts mailed directly to the student must be submitted with the application packet and must remain in their sealed envelope. Students may also request their college or university to send electronic transcripts directly to the Office of Licensure via Parchment or National Student Clearinghouse. Colleges and universities not participating in the Parchment or National Student Clearinghouse networks will need to mail their official transcripts to the student, but they must remain in sealed envelopes. Please do not ask the college or university to mail an official transcript to the Office of Licensure.

Placement records sent from colleges, grade reports, photocopies, and student printouts of unofficial transcripts will not be accepted or returned.

The employing Virginia educational agency should submit the completed application and supporting documentation in a single packet to:

**Virginia Department of Education
Department of Teacher Education and Licensure
PO Box 2120
Richmond, Virginia 23218-2120**

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PO Box 2120 • Richmond, VA 23218-2120

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NONREFUNDABLE APPLICATION FEE (determined by the address provided below): **\$100 in-state fee; \$150 out-of-state fee**
Make checks payable to Treasurer of Virginia. A \$50 fee is assessed for a returned check. Please include printed receipt if paid online.

PART I: INFORMATION**PLEASE PRINT OR TYPE**

<u>Social Security Number</u> - -	<u>Date of Birth</u> (Month/Day/Year)	<u>Military Veteran Branch:</u> <u>Military Reserves Branch:</u>	<u>U.S. Military Spouse:</u> <input type="checkbox"/> Yes <input type="checkbox"/> No
<u>Last Name</u>	<u>First Name</u>	<u>Middle Name</u>	<u>Suffix</u>
<u>Address</u> (Street, City, State, Zip Code) [Please note that the address provided is public information.]*			
<u>Preferred Telephone Number</u> (include area code) () -	<u>Email Address</u>	<u>Gender</u> (for statistical purposes only) <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-binary	
Please answer both of the following questions:	Are you Hispanic or Latino? (choose only one) <input type="checkbox"/> No, not Hispanic or Latino <input type="checkbox"/> Yes, Hispanic or Latino		
	What is your race? (choose one or more) <input type="checkbox"/> 1. American Indian/Alaskan Native <input type="checkbox"/> 2. Asian <input type="checkbox"/> 3. Black or African American <input type="checkbox"/> 4. Native Hawaiian or other Pacific Islander <input type="checkbox"/> 5. White		

*ADDRESS CHANGE - THE APPLICANT MUST NOTIFY THE OFFICE OF LICENSURE, DEPARTMENT OF EDUCATION, IN WRITING OF AN ADDRESS CHANGE. Name and address (of persons applying for a license) may be disseminated pursuant to a request under § 2.2-3802(5) of the *Code of Virginia*.

PART II: BACKGROUND QUESTIONS:

Background Questions	Yes	No
Have you ever been convicted of, or entered a plea of guilty or no contest to, a felony? (If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of, or entered a plea of guilty or no contest to, a criminal offense in another country? (If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of, or entered a plea of guilty or no contest to, a misdemeanor involving a child (minor) or a student? (If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been convicted of, or entered a plea of guilty or no contest to, a misdemeanor involving drugs (excluding offenses related to alcohol or possession of one ounce or less of marijuana)? (If yes, please attach a letter of explanation and a copy of the court documents indicating judgment and disposition of the case from the court.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever been the subject of a founded complaint of child abuse or neglect by a child protection agency? (If yes, please attach a letter giving full details and official documentation of the founded complaint.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever had a teaching, administrator, pupil personnel services, or other education-related certificate or license revoked, suspended, invalidated, cancelled, or denied by another state, territory, or country; surrendered such a license or the right to apply for such a license; or had any other adverse action taken against such a license? <u>Please note:</u> This includes a reprimand, warning, or reproof and any order denying the right to apply or reapply for a license. (If yes, please attach a letter giving full details and official documentation of the action taken.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you currently the subject of any review, inquiry, investigation, or appeal of alleged misconduct that could warrant discipline or termination by a school division or other education-related employer or an adverse action against a teaching, administrator, pupil personnel services, or other education-related license or certificate? <u>Please note:</u> This includes any open investigation by or pending proceeding with a child protection agency and any pending criminal charges. (If yes, please attach a letter giving full details and any official documentation available regarding the matter.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Have you ever left any education- or school-related employment, voluntarily or involuntarily, under any of the following circumstances: (1) while the subject of a review, inquiry, investigation, or appeal of alleged misconduct; (2) when you had reason to believe a review, inquiry, investigation or appeal of alleged misconduct was under way or imminent; or (3) while any administrative or judicial proceeding involving an allegation of misconduct was pending, eligible for appeal, or under appeal? <u>Please note:</u> This includes any open investigation by or pending proceeding with a child protection agency and any pending criminal charges. (If yes, please attach a letter giving full details and any official documentation available regarding the matter.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Applicant's Signature:	Date:
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ORIGINAL SIGNATURE REQUIRED

MONTH/DAY/YEAR

The application is continued on the following page. Pages 1 and 2 each must include the applicant's signature and date on each page. A complete application must be submitted.

(Application Page 1 of 2)

APPLICATION FOR A VIRGINIA TECHNICAL PROFESSIONAL LICENSE (Page 2)

PART III--HIGH SCHOOL EDUCATION OR EQUIVALENCY (Include high school diploma earned or GED)

Name of High School	Location	Dates Attended (high school)	Diploma or GED (Please check)
			Please check: <input type="checkbox"/> Diploma <input type="checkbox"/> GED

PART IV--COLLEGE EDUCATION (Include colleges and universities where coursework was completed and degrees earned.)

Name of Institution	Location	Dates Attended	Degree (if earned)	Major/Major Subjects

PART V--TEACHING EXPERIENCE (Grades K-12 only -- Full-time, contractual experience only, not substitute, summer school, or aide)

Name of School	Location	Dates of Employment	Grade(s)/Subject(s) Taught

PART VI--OUT-OF-STATE EDUCATIONAL LICENSE -This section must be completed, if applicable. (Enclose a copy of each license.)

State:	First issue date:	Last expiration date:
State:	First issue date:	Last expiration date:

PART VII-- OCCUPATIONAL/PROFESSIONAL LICENSE (Enclose a copy of each license.)

Name of License	First issue date	Last expiration date

PART VIII--OCCUPATIONAL EXPERIENCE RELATIVE TO ENDORSEMENT (TEACHING) AREA REQUESTED

Name of Firm	Location (City/State)	Dates of Employment (Month/Year to Month/Year)	Type of Work/Duties Performed

PART IX: COMPLETE IF YOU HAVE ACCEPTED A POSITION IN VIRGINIA REQUIRING A LICENSE

Name of Employer	Beginning Date of Employment (Month/Day/Year)	Assignment
Address		
City, State, Zip Code		

BY MY SIGNATURE, I CERTIFY THAT THE INFORMATION ON THIS FORM IS ACCURATE AND COMPLETE. I UNDERSTAND THAT MISREPRESENTATION MAY RESULT IN THE DENIAL, REVOCATION, CANCELLATION, OR SUSPENSION OF THE VIRGINIA LICENSE.

Applicant's Signature:	Date:
Original Signature Required	Month/Day/Year

BY MY SIGNATURE, I CERTIFY THAT THE APPLICANT GRADUATED FROM AN ACCREDITED HIGH SCHOOL (OR POSSESSES A GED CERTIFICATE) AND THE APPLICANT'S OCCUPATIONAL EXPERIENCE WAS VERIFIED PRIOR TO THE SUBMISSION OF THIS APPLICATION.

Signature:	Date:
Superintendent/Director of Accredited Nonpublic School	Month/Day/Year

Name of Superintendent/Director of Accredited Nonpublic School
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