2-Year Provisional License Renewal or Advance a 2-Year Provisional/2-Year Alternative to a 5-Year Professional License

PERSONAL INFORMATION			
SSN		Ohio Department of Education	
-OR- Educator State ID		Office of Educator Licensure 25 S. Front St., Mail Stop 105	
Birthdate	Male Female	Columbus, Ohio 43215-4183	
First Name	MI	This application has 2 pages to be completed. Please complete using black or blue ink only.	
Last Name		Use this application to	
Address		Renew a 2-Year Provisional License Advance a 2-Year Provisional License to	
		a 5-Year Professional License	
City State	Zip	Advance a 2-Year Alternative License to a 5-Year Professional License	
Home Phone Cell Phone		Diagon shook and	
E-mail		Please check one: Renewal Advance	
		Tienewai Advance	
Other names that may appear on official documents (maiden, etc.)		Amount enclosed: \$	
BACKGROUND CHECKS			
First Ohio License, Certificate or Permit When an individual submits an application for his/her first license, certific report, completed within 365 days of the date the application is received			
Renewals and Additional Licenses, Certificates or	Permits		
	in Ohio for the past 5 years? Yo	u must check one:	
O YES	O NO	hadraraund abadra are required if the reports on	
An FBI background check is required if the report on file with ODE than 5 years old at the date the application is received. A BCI back check is required if you do not have one on file with ODE.		background checks are required if the reports on e than five years old on the date the application is	
Please note: The Ohio Department of Education is not able to accept paper reports. A from the Ohio Bureau of Criminal Investigation. When you have your finge under 'Reason Fingerprinted' to send to the Ohio Department of Education Reason Fingerprinted	erprints taken at a WebCheck facility, ple		
X Send to the Ohio Department of Education			
Please do not use the Department of Education address in the 'mail to' s For more information on how to complete this electronic process, please	•		
LEGAL QUESTIONS (Each question MUS	T be answered by placing a	✓ in the appropriate box.)	
If you answer YES to any question, attach an explanation to this applicati matter was heard.	on. Please include the year of convicti	on, the nature of the offense and the court where the	
Yes No Have you ever been convicted of, found gui	lty of, pled guilty to, or pled no cont	est to any misdemeanor other than a traffic offense?	
Yes No Have you ever been convicted of, found gui	Ity of, pled guilty to, or pled no cont	est to any felony?	
Yes No Have you ever had a criminal conviction se	aled or expunged?		
		n for the same, revoked, suspended, limited or denied?	
Yes No Have you ever surrendered ANY certificate,	license or permit, other than a drive	er's license?	
APPLICANT SIGNATURE			
I certify under penalty of loss of my right to teach or wor and correct in every respect.	k in the schools of Ohio that th	ne answers to these five questions are true	
Signature of Applicant	Date	Page 1 of 4 July 2011	

CREDENTIAL INFORMATION (Indicate License Requested).
Please indicate the license type(s). You may reference the general instructions page to find your license TYPE codes. The teaching field and endorsement codes will be automatically entered by the Office of Educator Licensure.
RENEWAL 2-Year Provisional License Please submit OFFICIAL TRANSCRIPTS (no photocopies or grade reports) showing all coursework required for the renewal. If transcripts are to be sent separately from the application, include a note indicating which college(s) will be sending transcripts. Career Technical Workforce Development License: Individuals who are renewing this license must submit a completed CTE-37 Form signed by the university official verifying eligibility to renew. Transcripts are not required for the renewal.
ADVANCE 2-Year Provisional License to a 5-Year Professional License Please check one:
Teachers who fulfilled requirements of the Transition Resident Educator Program including mentoring and formative assessments Resident Educators must have their mentors and superintendents sign the Transition Resident Educator Verification Form on page 4 verifying completion of the Transition Resident Educator Program including formative assessments with an ODE certified mentor. Individuals who are advancing a Career Technical Workforce Development license must also submit a completed CTE-37 Form signed by the university official verifying that all program requirements have been met.
Teachers who fulfilled the former Entry Year Program and Praxis III Assessment if completed prior to July 1, 2009
Please submit a letter, on district letterhead, signed by the superintendent of the district where the entry year program was completed, verifying successful completion of the mentoring component of the entry year program. Praxis III Assessment data needs to have been reported directly to the Ohio Department of Education. Individuals who are advancing a Career Technical Workforce Development license must also submit a completed CTE-37 Form signed by the university official verifying that all program requirements have been met.
Career Technical Workforce Development teachers who already hold another 5-year professional teaching license
Career technical workforce development teachers who already hold another type of 5-year professional teaching license are not subject to entry year or transition resident educator program requirement and must submit only the CTE-37 Form signed by the university verifying that all program requirements for the new license have been met.
Counselors who successfully completed the Induction Year for School Counselors Please submit the School Counselor Induction Form signed by the superintendent and supervising licensed school counselor. The Verification Form may be found on the ODE website at: education.ohio.gov (keyword search: Induction Year).
Teachers who completed three years of teaching outside the state of Ohio Teachers who have completed three years of teaching in another state must submit a letter, on district letterhead, signed by the superintendent or human resources director verifying that experience. A copy of the teaching license must also be submitted.
Teachers who completed an alternative licensure pathway Alternative educators who complete the Transition Resident Educator Program during the 2010-11 school year must have their mentor and superintendent sign the Transition Resident Educator Verification Form on page 4 verifying completion of the Transition Educator Program including formative assessments with an ODE certified mentor. Alternative license holders must also complete all additional requirements prior to applying to advance to the 5-year professional license, including two years of mentored teaching under the alternative license; additional professional education coursework; and required licensure exams.
Principals advancing to the 5-year professional license Principals have the option to advance and align this license to an existing 5-year license; or, the license may be issued as a separate 5-year license with an effective date that is reflective of the current year. If aligned, the license will take on the validity period of the existing license.
EFFECTIVE YEAR
The effective year for an Ohio license begins July 1, regardless of the date of issuance. When renewing, you may apply after January 1 of the year the license expires.
License to begin on July 1,
MAIL TO ORGANIZATION OR INDIVIDUAL (Check only one box.)
Home School District School District Name IRN #
APPLICANT SIGNATURE
I certify under penalty of loss of my right to teach or work in the schools of Ohio that the information provided on this page is true and correct in every respect.
Signature of Applicant Date
Print Name

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Transition Resident Educator Program Verification

lame	Last Nan	ne	Birthdate	Birthdate	
	_ OR	Educator State ID	-		
			below verifying completion of the Ti s with an ODE certified mentor.	ransiti	
I certify the applicant fulfilled the tools during school year 2009-2		Transition Resident Educator	Program using the required formative asse	ssmen	
Please indicate the year of ment	oring				
2009-2010	2010-2011				
School o	r District		IRN#		
Signature	of Mentor		Date		
Print Mentor Name					
I certify the applicant fulfilled the	requirements of the Tra	ansition Resident Educator P	rogram and the mentor is an ODE-certified m	entor.	
School o	r District		IRN#		

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2R/A Instructions

GENERAL INSTRUCTIONS

Please read carefully

Use this application to: Renew a 2-Year Provisional License

Advance a 2-Year Provisional Teaching, School Counselor or Principal to a 5-Year Professional License

Advance an Alternative TEACHING License to a Standard License

Advance a 2-Year License to a 5-Year Professional License based on out of state teaching experience

Application status may be checked online at education.ohio.gov. Use the search option to access Educator Profile.

PLEASE DO NOT STAPLE MATERIALS TOGETHER. Please mail to:

Office of Educator Licensure 25 South Front Street, Mail Stop 105 Columbus, OH 43215-4183

ADVANCING A 2-YEAR ALTERNATIVE

The holder of an alternative educator license may advance to a standard teaching license upon completion of two years of successful teaching experience under the alternative educator license as verified in a letter, on letterhead, by the employing school superintendent; successful completion of the required Praxis II tests; AND

- for Adolescence to Young Adult 7-12:completion of 12 additional semester hours of coursework, with a GPA of 2.5 or above, prior to expiration of the alternative educator licnse, from a college or university approved to prepare teachers, in the principles and practices of teaching; student development and learning; pupil assessment procedures; curriculum development; classroom management; and teaching methodologies
- for Intervention Specialist K-12: completion of 12 additional semester hours of course work, with a GPA of 2.5 or above, prior to expiration of the alternative educator license, from a college or university approved to prepare teachers, in the principles and practices of teaching; student development and learning; pupil assessment procedures; curriculum development, classroom management; and teaching methodologies; or in the teaching of reading and/or phonics.

FEES

A check or money order payable to "Treasurer, State of Ohio" covering the application fee(s) specified for the license(s) requested must accompany each application. **Do not send cash**.

Please note: \$25 of the processing fee is non-refundable if eligibility requirements for the license are not met.

2-Year Provisional License **Renewal** = \$80 for the first license type

\$20 for each additional license type requested with the same effective year

Advance a 2-Year Provisional License to a 5-Year Professional License:

Teacher = \$ 100

\$ 20 for each additional license type requested with the same effective year.

Counselor = \$200Principal = \$200

\$ 20 if aligned to an existing 5-year Professional License.

LICENSE TYPES

- 62) MIDDLE CHILDHOOD (4-9)
- (63) ADOLESCENCE TO YOUNG ADULT (7-12)
- (64) MULTI-AGE (PK-12)
- (65) INTERVENTION SPECIALIST
- (66) CAREER-TECHNICAL
- (71) EARLY CHILDHOOD (PK-3)
- (72) EARLY CHILDHOOD INTERVENTION SPECIALIST (PK-3)
- (73) PRINCIPAL
- (74) PUPIL SERVICES (school counselor)

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