

APPLICATION FOR LICENSE RENEWAL
No Fee Required – paid by NNPS; effective July 1, 2007

*Please submit a completed application to NNPS Human Resources.

Part I-INFORMATION

PLEASE PRINT OR TYPE

| | | | |
|--|-------------------|---|------------------------|
| <u>Last Name</u> | <u>First Name</u> | <u>Middle Name</u> | <u>Employee ID No.</u> |
| <u>Home Address*</u> | | <u>City</u> | <u>State</u> |
| | | | <u>Zip Code</u> |
| <u>Daytime Telephone Number (include area code)</u> () | | <u>Home Telephone Number (include area code)</u> () | |
| <u>School/Location</u> | | | <u>Renewal Year</u> |
| Name Change (no fee required with license renewal) | | | |
| from _____ to _____ | | | |

Part II

| | | |
|---|------------------------------|-----------------------------|
| 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 of conviction.) | <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 of conviction.) | <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)? (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 of conviction.) | <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 (not alcohol)? (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 of conviction.) | <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 had any other adverse action taken against such a license? (If yes, please attach a statement giving full details and official documentation of the action taken.) | <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 statement giving full details and official documentation of the founded complaint.) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Have you ever left any education- or school-related employment, voluntarily or involuntarily, while the subject of an investigation, inquiry, or review of alleged misconduct or when you had reason to believe an investigation of alleged misconduct was under way or imminent? (If yes, please attach a statement giving full details and any official documentation available regarding the investigation, inquiry, or review.) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| To your knowledge, are you currently the subject of any investigation, inquiry, or review 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? (If yes, please attach a statement giving full details and any official documentation available regarding the investigation, inquiry, or review.) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

Part III-Signature and Verification of Renewal Activities

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

Applicant's Signature _____ Date _____

*Please submit a completed application to NNPS Human Resources.

*****FOR HR OFFICE USE ONLY*****

PGP PPS CP TP # _____ B M E D ADDR TSIP 1stAID VA. HIST PTS _____