

REQUEST FOR AN INITIAL CAREER-TECHNICAL LICENSE

| | | | |
|-----------------------------|-----------------------|---|-------------|
| last name | first name | middle name | maiden name |
| social security number | employing school unit | starting date of employment | |
| area of assignment | holds degree in | applicable work experience: number of years | |
| degree-awarding institution | | date degree earned | |

Statement of employing school system:

This person is the most qualified applicant for this position. We request that his or her credentials be evaluated for career-technical licensing.

signature of superintendent or designated personnel officer

signature of career-technical education director

date