

Type or print in ink

Division of Teacher Education and Licensure
 Virginia Department of Education
 P.O. Box 2120
 Richmond, Virginia 23218-2120

INDIVIDUALIZED RENEWAL RECORD

| | | | | |
|----------------|-------|--------|-----------------------|---------------------|
| Name: Last | First | Middle | Renewal Year | Social Security No. |
| Home Address | | City | State | Zip Code |
| Endorsement(s) | | | Highest Degree Earned | |

Summary of Points Earned During the Past Five Years to be Credited Toward Renewal:

| Option Maximum Points | 1 (180) | 2 (45) | 3 (45) | 4 (45) | 5 (90) | 6 (90) | 7 (90) | 8 (90) | 9 (90) | 10 (180) | Credit for All Options |
|--------------------------|------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-----------|-------------|---------------------------|
| Total Points | | | | | | | | | | | |

Verification and Recommendation for License Renewal

| | | | |
|-----------------------|------|---------------------|------|
| Applicant's Signature | Date | Advisor's Signature | Date |
|-----------------------|------|---------------------|------|

I recommend the renewal of the enclosed Virginia license and certify that the above-named license holder completed the listed activities and that these activities comply with Virginia's renewal regulations.

| | | |
|--|------|----------|
| Superintendent's or Designee's Signature | Date | Division |
|--|------|----------|

Exception to content course work requirement granted? Yes No

Reason: Particular need of teacher New teaching endorsement

| | | Verification of Completed Activities | | | |
|---|--------------------|--------------------------------------|-----------------------|---------------------|------|
| | | Activity Points | Applicant Initials | Advisor Initials | Date |
| Option 1: College Credit (180) | | | | | |
| Course No./Title | College/Year Taken | | | | |
| | | | | | |
| Option 2: Professional Conference (45) | | | | | |
| Conference Name | Dates Attended | | | | |
| | | | | | |
| Option 3: Peer Observation (45) | | | | | |
| Person Observed | Dates Observed | | | | |
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