

Teacher Professional License Renewal Form

Please complete this form in its entirety to renew your teaching license. Ensure all information is accurate and up to date.

Full Name

License Number

Current License Expiration Date

Contact Information

Current School/Employer

Professional Development Activities (past renewal period)

Background Check

☐ I certify that I have not been convicted of any crimes that would disqualify me from holding a professional teaching license.

Applicant Signature

Date

[Print Form](#)