Newport News Public Schools

Human Resources Department Licensure Request

To request action on your Virginia teacher's license, please complete the information below and return it to the

Human Resources Office.		
Name:	Employee ID #:	Date:
Address:		
School/Location:	Content:	
Licensure Request (Check those that apply	7)	
Initial/Provisional License (\$100 or \$1	50)	
List Endorsement(s) Seeking:		
Add a Degree to License: (\$25)	Master's Educational S _I	pecialist Doctorate
Add/Evaluate for an additional endor	sement on License: (\$50 for each	n endorsement)
List Endorsement(s) Seeking:		
Request Duplicate Copy of Active Lic	cense: (\$25)	
Name Change (\$25) From:		
The following actions require no fee:		
Name Change Only		
Address Change Only		
Add endorsement(s) based upon an ini (Must include a copy of completed		the last three years
Change Statement of Eligibility or Pro	visional to Ten-Year License	
All requests for action on licenses that recashier's check, or money order. Make c You may also use the 'Pay Now' feature	heck or money order payabl	le to the: Treasurer of Virginia.
Enclosed amount \$ Check # VDOE Pay Now receipt	Money Order #	

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