

## REQUEST FOR SUBSEQUENT ENDORSEMENTS

Use this form to request evaluation for an additional endorsement on an existing teaching certificate. Fill out the form completely and make sure to include your signature, the non-refundable fee, and any additional non-ISU transcripts related to this endorsement. Only one endorsement field can be requested per form but multiple grade levels may be checked. Use the Available Endorsements list on the back for the requested field. Upon evaluation, you will be notified if ISU has recommended your endorsement with the ISBE (with instructions on how to complete the process) or if there is a deficiency for the endorsement. Please allow at least two weeks for processing.

Name \_\_\_\_\_  
First Middle Last Maiden

Address \_\_\_\_\_

City, State Zip Code \_\_\_\_\_

Telephone \_\_\_\_\_  
Daytime Alternate

Email address \_\_\_\_\_

Date of birth \_\_\_\_\_ ISU Student ID Number \_\_\_\_\_

IEIN \_\_\_\_\_ License ID Number \_\_\_\_\_

Dates of attendance at ISU or graduation date \_\_\_\_\_

Endorsement requested \_\_\_\_\_

Grade level (check all that apply)	
Birth-Grade 2	<input type="checkbox"/>
Grade 1-Grade 6	<input type="checkbox"/>
Grades 5-8	<input type="checkbox"/>
Grades 9-12	<input type="checkbox"/>

Other: \_\_\_\_\_

First request for this endorsement

Follow-up for prior requested endorsement   
(fee not required for follow-up evaluation)

Transcripts from \_\_\_\_\_ are  
(Other than Illinois State University)

attached.

Non refundable fee for \$30.00 is included.

(Check, cash or money order is acceptable.)

For Office Use Only:

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Drop-off** completed form with transcripts & fee to:  
**Moulton Hall**  
**Registrar Service Center, Room 107**  
**Illinois State University in Normal, IL**  
**M-F 8am – 4:30 pm**

**Mail** completed form with transcripts & fee to:  
**Office of the University Registrar**  
**% Administrative Clerk**  
**Campus Box 2202**  
**Normal, IL 61790-2202**

