

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)	
PreK-Grade 12	
Birth-Grade 2	
Grades 5-8	
Grades 9-12	

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 _____

Mail completed form with transcripts & fee to:

Office of the University Registrar
% Administrative Clerk
Campus Box 2202
Normal, IL 61790-2202

Or **Drop Off** at Moulton Hall Registrar Service Center
 Room 107