

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 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. 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 2-3 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	<input type="checkbox"/>
Birth-Grade 2	<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 ☐

Transcripts from _____ are attached.
(Other than Illinois State University)

For Office Use Only:

Signature _____ Date _____

Email completed form to teacher@ilstu.edu