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OFFICE OF PROFESSIONAL PRACTICES

VOLUNTARY SURRENDER OF CERTIFICATE(S)

I, Christopher M. Grant, have reason to believe that I am or might be ineligible to hold a certificate(s) for reasons which do or might constitute grounds for revocation of the certificate(s). Accordingly, I hereby voluntarily surrender the following certificate(s):

- 1. Certificate No. 410450A
2. Certificate No.

I have not been, to the best of my knowledge, convicted of any felony crime listed within WAC 180-86-013(1).

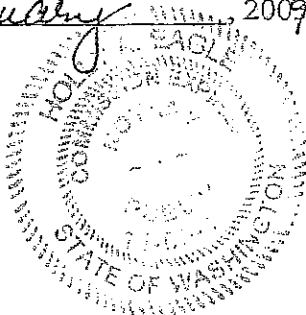
I agree, if I request reinstatement of the certificate(s) I have voluntarily surrendered, to provide the Superintendent of Public Instruction with an affidavit describing in full the reasons for my voluntary surrender of the certificate(s) listed above. I further understand that the Superintendent of Public Instruction will notify other states and public and private school officials within the state of Washington that I have voluntarily surrendered my certificate(s).

Dated this 22 day of January, 2009.

Christopher Merrill Grant
Printed Name
Signature
Address

SUBSCRIBED AND SWORN to before me this 22nd day of

January, 2009



Notary Public in and for the state of Washington, Residing at Spokane
My commission expires: 11/09/10