



# SUPERINTENDENT OF PUBLIC INSTRUCTION

DR. TERRY BERGESON OLD CAPITOL BUILDING • PO BOX 47200 • OLYMPIA WA 98504-7200 • <http://www.k12.wa.us>

I, Tony Kim, certify that on 3/31/2000, I mailed a copy of this document, certified & postage prepaid, to all parties or their counsel of record. I certify under penalty of perjury, under the laws of the state of Washington, that the foregoing is true and correct.

March 31, 2000

**CERTIFIED MAIL  
RETURN RECEIPT REQUESTED**

Paul Drachler, Attorney at Law  
1613 Smith Tower  
506 Second Ave.  
Seattle, WA 98104-2346

RE: ZERAN, JOHN J.  
Certificate No. 190612B  
OPP No. D99-03-028

Dear Mr. Drachler:

I have received your client's signed statement, dated March 6, 2000, voluntarily surrendering their Washington educational certificate. Notification to that effect, including your client's name, certificate number, and social security number will be shared with other states and public and private school officials within the state of Washington.

Your client must immediately return the certificate to the Office of Professional Practices, Superintendent of Public Instruction, Old Capitol Building, P. O. Box 47200, Olympia, Washington, 98504-7200.

If you have any questions, please call the Office of Professional Practices at (360) 586-7436.

Sincerely,

Dr. William I. Jordan  
Deputy Superintendent  
General Administration and Operations

WIJ:tk

**VOLUNTARY SURRENDER OF CERTIFICATES**

I, John ZERAN, ~~have reason to believe that I am or~~ <sup>88</sup> ~~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. Prof Ed Cert Certificate No. 190612 B
- 2. N/A Certificate No. N/A

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 6<sup>th</sup> day of MARCH, 2000.

JOHN ZERAN  
 Printed Name  
[Signature]  
 Signature  
[Redacted]  
 Address

SUBSCRIBED AND SWORN to before me this 6<sup>th</sup> day of March, 2000.

Ligaya A. Pena  
 Notary Public in and for the state of WA, Residing at Amburg  
 My commission expires: 4-1-2003

Notary Public  
 State of Washington  
 LIGAYA A. PENA  
 My Appointment Expires Apr 1, 2003