



OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION
 Professional Certification
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 Web Site: <http://www.k12.wa.us/cert/>
 E-Mail: cert@k12.wa.us

PREREQUISITE EXPERIENCE FOR A PRINCIPAL'S CERTIFICATE

INSTRUCTIONS TO THE APPLICANT: Candidates applying for a residency principal's certificate must, as a condition for the issuance of such certificate, document successful school-based experience in an instructional setting.

SECTION I TO BE COMPLETED BY ALL APPLICANTS FOR A RESIDENCY PRINCIPAL CERTIFICATE:

1. NAME	LAST	FIRST	MIDDLE	MAIDEN/FORMER NAME
2. ADDRESS				3. DATE OF BIRTH
CITY/STATE/ZIP				4. SOCIAL SECURITY NO. (OPTIONAL)
5. TELEPHONE: BUSINESS ()				6. E-MAIL
				HOME ()

Based on personnel records, this statement **MUST** be prepared and signed by the superintendent or the personnel director of the school district or private school. Stamped signatures **MUST** be initialed by the individual using the stamp. Please return the completed form directly to the applicant.

SECTION II

TO BE COMPLETED BY EMPLOYER, OR HIS/HER DESIGNEE, WHERE APPLICANT WAS EMPLOYED IN AN INSTRUCTIONAL SETTING		
SCHOOL DISTRICT	FROM	TO
ADDRESS	PRINTED NAME	
CITY/STATE/ZIP	TITLE	
SIGNATURE	DATE	TELEPHONE ()

RETURN COMPLETED FORM TO APPLICANT

APPLICANT: INCLUDE THIS COMPLETED FORM WITH YOUR OTHER APPLICATION FORMS. RETURN ALL APPLICATION FORMS TO THE INSTITUTION/ORGANIZATION WHERE YOU ARE COMPLETING YOUR ADMINISTRATIVE PROGRAM.