OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION Professional Certification Old Capitol Building, PO BOX 47200 OLYMPIA, WA 98504-7200 (360) 725-6130 TTY (360) 664-3631 Web Site: http://www.k12.wa.us/certification E-Mail: cert@k12.wa.us APPLICATION FOR WASHINGTON STATE					
NONIMMIGRANT EXCHANGE TEACHER CERTIFICATE					
Country of Exchange: Spain	n China Japan	Other			
OSPI partners with the Spanish Center at OSPI and the Confucius Institute of the State of Washington to support visiting teachers from Spain and China to teach in K-12 public and private schools in the state. All visiting teachers through these					

teachers from Spain and China to teach in K-12 public and private schools in the state. All visiting teachers through these programs receive J-1 visa support services through the Institute of International Education (IIE) and qualify for the Nonimmigrant Exchange Teacher Certificate (described below), issued by the OSPI Professional Certification Office. The state does not provide funding to districts for hosting visiting teachers.

Certification (registration) is required to teach in Washington. The following materials must be completed and returned to the Office of Superintendent of Public Instruction.

Application \$39 OSPI p

\$39 OSPI processing fee

Notice of Exchange or Visiting Teacher (this form must be given to the Superintendent or Personnel Director of the school district to complete Section B)

Character and Fitness Supplement

Washington State Patrol Clearance (directions on reverse side of Form WSP-CRD-430)

A temporary Nonimmigrant Exchange Teacher Certificate is valid for one academic year and may be issued to nonimmigrants who have filed an application for the certificate, have complied with conditions prescribed in RCW 28A.405.025, and have training and experience for the initial teaching certificate as set forth in the Washington Administrative Code.

NAME	LAST	FIRST	MIDDLE	MAIDEN/FORMER NAME
ADDRESS				DATE OF BIRTH
CITY/STATE/COUNTRY/ZIP				PLACE OF BIRTH
E-MAIL				TELEPHONE

DISTRICT NAME	
ADDRESS	
CITY/STATE/ZIP	TELEPHONE

1. Have you ever held an educational certificate (registration) in any state in the United States? If yes, list the state(s).

2. Do you hold certification (registration) in your home country? If so, what subject are you certified to teach? What age levels are you certified to teach?

## For OSPI Use Only

TYPE OF CERT ISSUED			ENDORSEMENTS	MAILED
APPROVED BY	DATE	STATE		ISSUED
MATERIALS SENT				CODES

3. Applicants for certification are to provide complete educational records. Education beyond high school:

Educational Institution	Dates of Attendance	Degrees Earned	Postgraduate Credits Earned

Attach additional page if necessary.

4. Applicants for certification are to provide complete employment experience records.

Grades Taught	Dates of Employment	District	City	State	No. of Days if Less Than Full-Time Employment

Attach additional page if necessary.

Fingerprint cards have been sent:	Yes	No

## AFFIDAVIT

## TO BE COMPLETED BY APPLICANT

I, the undersigned, do solemnly swear (or affirm) that the foregoing statements are true and correct. I understand that providing false information may be grounds for denial of my certificate.

Signature of Applicant

Date sent:

Date

Place (City/State/Country)

Return Application to: Professional Certification Office of Superintendent of Public Instruction OLD CAPITOL BUILDING PO BOX 47200 OLYMPIA WA 98504-7200