

**LPDC Verification Form For Licensure Renewal
(Required to be submitted with License Application)**

Form B

Name of Applicant _____

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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|
| <p>Step 1. Enter issue date from the license/certificate to be renewed.</p> <p>(The issue date is located in the upper right hand corner of the certificate. You can access certificate/licensure information through your SAFE account. See page 6.)</p> | <p align="center">_____/_____/_____</p> |
| <p>Step 2. Enter semester hours taken since the issue date of the certificate to be renewed.</p> | <p align="center">_____</p> |
| <p>Step 3. Enter quarter hours taken since the issue date of the certificate to be renewed.</p> | <p align="center">_____</p> |
| <p>Step 4. Enter WH or out-of-district issued continuing education units (CEU's) earned since the issue date of the certificate to be renewed.</p> | <p align="center">_____</p> |
| <p>Step 5 Enter date of last fingerprinting to verify within the last 5 years.</p> | <p align="center">_____</p> |
| <p>Step 6. Print and attach your IPDP plan and list of activities.</p> | |

Please check this box if you believe you meet the qualifications for “Consistently High Performing Teacher” as defined by Ohio Department of Education. For more information please check the Ohio Department of Education website: education.ohio.gov

LPDC VERIFYING SIGNATURE _____ DATE _____
(This verifies that the information stated on this form is correct and that the named educator is an employee of the district or school the LPDC serves.)

APPLICANT’S SIGNATURE _____ DATE _____
(This verifies that the information stated on this form is correct and true.)