



OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION
 Professional Certification
 Old Capitol Building, PO BOX 47200
 OLYMPIA WA 98504-7200
 (360) 725-6400 TTY (360) 664-3631
 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 residency principal's certificate must, as a condition for the issuance of such certificate, document three years of successful school-based experience in an instructional role with students. Note that building and central office administrative experience does not meet the instructional experience requirement.

SECTION I TO BE COMPLETED BY ALL APPLICANTS FOR 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:				5. E-MAIL
BUSINESS ()		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		
APPLICANT'S TITLE (Note: Do Not include building or district level administrative experience.)		
SCHOOL DISTRICT	FROM	TO
ADDRESS	PRINTED NAME	
CITY/STATE/ZIP	TITLE OF PERSON COMPLETING FORM	
SIGNATURE	DATE	TELEPHONE ()

RETURN COMPLETED FORM TO APPLICANT