

Renewal and Reinstatement Requirements

North Carolina licenses must be renewed every five years. The renewal process ensures that professional school personnel continually update their professional knowledge and technical competency. Each license holder is responsible for knowing and satisfying license renewal requirements. Failure to renew a license makes one ineligible for employment.

Credit required to renew a license:

- 10 semester hours or 15 units of renewal credit. **Course work must be directly related to an individual's area(s) of licensure and/or professional responsibilities as a public school educator** (e.g., classes in computers; reading; exceptional children; sign language; drug, alcohol, or child abuse; CPR; first aid; classroom management; stress management; assertiveness training; Newspapers in the Classroom; education; effective teacher training; second languages; and AIDS education).
 - ▶ A unit of renewal credit is equivalent to one quarter hour or one in-service credit from a North Carolina public school system. Generally, a unit reflects ten contact hours.
 - ▶ One semester hour is equivalent to 1.5 units of credit.
- For a license to remain current, all credit must be earned by the expiration date of the existing license. To renew an expired license, 10 semester hours or 15 units of renewal credit must be earned within the most recent five-year period.

Activities suitable for renewal credit:

- **College or university courses** [Transcripts are required as documentation; grade reports are not accepted.]
- **Local in-service courses or workshops** [The administrative unit certifies credits.]
- **Classes and workshops approved by an LEA** [Documentation of completion is provided by the agency sponsoring the activity.]
- **Teaching experience** [One renewal credit is awarded for each year of full-time teaching completed during the 5-year renewal cycle. Part-time experience can be considered for renewal credit if it amounts to the equivalent of one year of full-time teaching.]

Keeping records of renewal credit:

- Individuals employed in a public school unit (or a nonpublic school authorized to administer staff development programs) should contact the superintendent, headmaster, or designated staff development coordinator about all renewal questions and recording of credits earned.
- Individuals not currently employed in a public school unit (or a nonpublic school authorized to administer staff development programs) should maintain their own records of renewal credit until it is time to renew their licenses.

How to Apply for Renewal of a License

- *Complete Form U: License Update Form.*
 - ▶ Fill in current personal information (please print or type).
 - ▶ Check the block labeled “renew a license.”
 - ▶ Answer the questions under Statement of Applicant.
 - ▶ Sign and date the License Update Form.

If you are not employed in a North Carolina public school system, please ignore the block labeled “school unit” as well as the line labeled “signature of superintendent or designee.”

- *Collect the supporting materials to accompany Form U.*
 - ▶ original transcripts or certificates of credit
Note: Grade reports are not accepted in place of transcripts.
 - ▶ verification of experience (Form E) – (or Form CE for college teaching experience)
Have this form completed if you have teaching experience that has not been filed with the Licensure Section.
 - ▶ processing fee (\$55)
You may pay by personal check, money order, or certified check (made payable to the Department of Public Instruction) or by Visa or MasterCard. To pay by credit card, fill out the credit card payment form (Form CC).

NOTE: IN THE EVENT PAYMENT IS REFUSED ON YOUR CHECK, DRAFT, OR OTHER METHOD OF PAYMENT SUBMITTED WITH YOUR APPLICATION, ANY LICENSE DOCUMENT THAT HAS BEEN ISSUED WILL BECOME IMMEDIATELY NULL AND VOID.

- *Mail the completed License Update Form, supporting materials, and processing fee to:*

Department of Public Instruction
Licensure Section
6365 Mail Service Center
Raleigh, North Carolina 27699-6365

Please do not fold down the corners of pages or use staples or paper clips to secure the application materials. Doing so will slow down the automated application process and delay your response. Simply place your documents in the enclosed envelope.

DO NOT USE HIGHLIGHTERS OF ANY COLOR ON YOUR DOCUMENTS. HIGHLIGHTED INFORMATION IS BLACKED OUT AND UNREADABLE BY OUR DIGITAL SCANNING SYSTEM. HIGHLIGHTED DOCUMENTS MAY BE RETURNED TO YOU.

License Renewal Questions & Answers

Does reciprocity apply to renewal of my NC license?

No. Reciprocity applies to first-time licensure, but not to renewal. A current license from another state will not renew your NC license. However, it may be possible to use the credits you earned to renew your other state license if those credits meet the following NC license renewal criteria:

- ❖ earned within a current five-year period
- ❖ applicable to your area of licensure or to educators in general
- ❖ each course/workshop consists of at least 10 contact hours
- ❖ each course/workshop is documented by transcript or certificate of credit

If I earned my renewal credits through staff development activities in another state, what kind of documentation do I need to include in my renewal packet?

Certificates of credit, or printout of earned credits from your school system that is verified by signature of a school system official. The documentation will need to include information on the amount of credit earned for each activity and how their point/credit system equates to contact hours or CEUs. Remember, the current other state license alone does not renew your NC license.

Can I upgrade my license or add a new area when I renew it?

Yes, if you have completed an approved education program through a regionally-accredited college/university that leads to licensure in the state where the college resides and that area is one that is issued in NC.

To request the upgrade or new area along with your renewal, include Form V, completed and signed by your college's dean of education, plus the supporting transcript, in your renewal packet. If requesting an upgrade to a higher class level (master's, etc.) a degree-dated transcript will be required to support the Form V. *Note: Do not include Form V in your packet unless you have completed an approved education program to add a new area to your license or to upgrade an existing license area.*

Do I have to pay another processing fee to upgrade/add an area or add experience?

Requesting the renewal of your license, adding experience credit, and upgrading/adding an area all at the same time (in the same packet) requires only one \$55 processing fee. *If submitted as separate requests, these actions require separate processing fees of \$55 each.*

Do I need to have my renewal credits approved?

If you are employed with a NC school system (or other NC school with an approved renewal plan), your employer must approve your renewal credits. If not employed as stated above, you do not need to have your renewal credits approved if they meet the following criteria:

- ❖ earned within a current five-year period
- ❖ applicable to your area of licensure or to educators in general
- ❖ each course/workshop consists of at least 10 contact hours
- ❖ each course/workshop is documented by transcript or certificate of credit

If you are uncertain about the acceptability of a particular course you are considering taking, you may contact the Licensure Section through the following website: www.ncpublicschools.org/employment/ncdpi.asp or by calling (919) 807-3310.

Can I audit a class and use it for renewal credit?

No. To use a class for renewal purposes, you must actually earn credit for it.

How many technology credits are required for renewal?

You are not required to earn technology credits for renewal unless you are employed in a NC school system (or other NC school with an approved renewal plan).

How many reading credits are required for renewal?

You are not required to earn reading credits for renewal unless you are employed as a teacher in grades K-8 in a NC school system (or other NC school with an approved renewal plan).

What kind of experience can count for renewal credit?

Teaching experience. Non teaching experience cannot be used for renewal credit.

Can I count a class/workshop I taught for renewal credit?

No. You can only use for renewal purposes classes in which you were a student and earned credit.

Can I receive credit for teaching in a private school or teaching in another state or another country?

Yes, if appropriately verified on Form E.

If my license has already expired, does that mean I am validating it? Should I check “validate an expired license” on the Form U?

No. Validation of an expired license is only done at the request of a NC employing school system.

If I have let my license expire, will I have to take the PRAXIS test?

No. If you previously met the testing requirement and had a clear and continuing license, additional testing is not required for renewal purposes, even if your license has expired.

Guidelines for Eligibility of Experience Credit

The following statements explain the policies that determine whether any given period of experience can be credited to a license holder's experience rating. Procedures for calculating the amount of experience to be credited are also described.

Experience as a professional educator:

- ◆ Service as a tutor, clerical paraprofessional, or substitute teacher is not recognized for experience credit.
- ◆ Service as an instructional teaching assistant qualifies for experience increments if instructional teaching responsibilities made up at least fifty percent of daily activities. One increment of experience is awarded for every two years of employment as an instructional teaching assistant which occurred before the individual qualified for at least a provisional/lateral entry license. One increment of experience credit is awarded for every one year of employment as an instructional teacher assistant which occurred after the individual qualified for at least a provisional/lateral entry license.
- ◆ Credit awarded for professional school experience is calculated according to these rules:
 - To be creditable, experience must have occurred after an individual was qualified as a professional educator.
 - Full-time work in a school unit of not less than six calendar months within one fiscal year (July 1 through June 30) earns one year of experience credit (excluding experience in a one-teacher private school).
 - Part-time work (at least fifteen hours per week) in a school unit can earn one increment of experience if the experience is equivalent to six calendar months of full-time employment during a single fiscal year.
 - Partial years of full-time or part-time experience can be combined for experience increments; e.g., two years of part-time work (at least fifteen hours per week) can be combined for an experience increment, and full-time experience of less than six calendar months in any fiscal year can be combined with another partial year of full-time work for an experience increment.
 - Experience credit for a single year served in two or more school administrative units is allowed unless the Superintendent of Public Instruction has been advised that the person's contract was willfully breached during the school year.
- ◆ Credit for college teaching experience is calculated as follows: teaching two courses (six semester hours or class hours) is considered half-time work; teaching four courses (twelve semester hours or class hours) is considered full-time work.

Nonteaching experience (Professional work experience in the public or private sector [including vocational or technical work] that is directly related to an individual's area of licensure and work assignment. To be credited this experience must be recommended by the employee's designated personnel administrator and is contingent on employment in the area.):

- ◆ Eligible experience
 - must have been completed after requisite training/education (for example, completion of a four-year degree)
 - must have been at least half time (20 hours/week or more)
 - must have been completed after age 18
 - does not include on-the-job training
 - is calculated on a calendar month basis and cannot be combined with other types of experience (for example teaching assistant, teaching).
- ◆ Credit for nonteaching experience is calculated according to these rules:
 - total the full-time calendar months of experience
 - divide the total months by 12 to determine the nonteaching work experience (if there is a remainder of 6 months, round up by 1 year)

[The six-month rule can only be applied for individuals with a minimum of one year of full-time employment (12 calendar months at 40 hours per week)].

Example: Thirty-four full-time calendar months of employment as a chemist in a chemical manufacturing company could be used to credit experience toward a science teacher's license. This would equal 2.8 years (rounded to 3 years), which would allow three years toward experience.
- ◆ If an individual holds more than one licensure area with qualifying experience, experience is credited only for the area with the highest experience. For example, a trades preparatory teacher has six years of carpentry experience and four years of automotive experience. The experience credited is based on the carpentry experience only.
- ◆ **An official job description must accompany each nonteaching experience form submitted.**

VERIFICATION OF K-12 EDUCATOR EXPERIENCE

last name	first name	middle name	maiden name
street address		city	state
			zip code
social security number			

To the employer:

Please return this form to the employee. Do not send it directly to the Licensure Section.

A	Professional Educator (K-12) Experience (to be completed by employer)			
School district or institution <input type="checkbox"/> public <input type="checkbox"/> private	Beginning date of service (month, day, year)	Ending date of service (month, day, year)	Total hours worked per week <input type="checkbox"/> full time <input type="checkbox"/> part time	Position title (e.g. teacher, counselor, supervisor, principal, superintendent)

I certify that this verification omits leave of absence periods and that all information is complete and correct according to the official records of the designated school district or institution.

signature of superintendent or designee	date	address
title	telephone	city, state, and zip code

B	K-12 Instructional Teacher Assistant Experience (to be completed by employer)			
School District	Beginning date of service (month, day, year)	Ending date of service (month, day, year)	Total hours worked per week	IMPORTANT: CHECK ONE BOX BELOW FOR EACH ASSIGNMENT
(Please use a separate line for each term taught)				
				CRITERIA STATEMENT BELOW* <input type="checkbox"/> IS <input type="checkbox"/> IS NOT TRUE
				CRITERIA STATEMENT BELOW* <input type="checkbox"/> IS <input type="checkbox"/> IS NOT TRUE
				CRITERIA STATEMENT BELOW* <input type="checkbox"/> IS <input type="checkbox"/> IS NOT TRUE

*** CRITERIA STATEMENT:**

The instructional teaching assistant assignment listed above was service in the classroom with school-age children with actual instructional teaching responsibilities comprising a minimum of 50% of daily activities.

I certify that this verification omits leave of absence periods and that all information is complete and correct according to the official records of the institution.

signature of superintendent or designee	date	address
title	telephone	city, state, and zip code

Experience Credit: How to Apply

► **For experience as a professional educator:**

Have Form E (Verification of Experience) filled out by your former employer.

(If you are submitting experience from more than one employer, have each one fill out a separate form. (Duplicate Form E as needed.) Please note that only experience of one-half time or more (fifteen hours per week) will be considered in the evaluation.

- ***For experience as a K-12 professional educator:*** Have the employer fill in Box A. All requested information must be supplied. Beginning and ending dates must include month, day, and year. Employers must provide their signature, title, address, and telephone number.
- ***For experience as a K-12 instructional teacher assistant:*** Have the employer fill in Box B. All requested information must be supplied. Beginning and ending dates must include month, day, and year. Employers must check one of the boxes in the italicized portion. Employers must also provide their signature, title, address and telephone number.

► **For nonteaching work experience:**

Have the former employer fill in Box A on Form NE (Verification of Nonteaching Experience).

All requested information must be supplied. Beginning and ending dates must include month, day, and year. Employers must provide their signature, title, organization name, address, and telephone number. Attach an official job description for each nonteaching work experience submitted. **DO NOT FILE NONTEACHING WORK EXPERIENCE DIRECTLY WITH THE LICENSURE SECTION. IT MUST BE SUBMITTED TO THE PERSONNEL OFFICER OF YOUR NORTH CAROLINA EMPLOYING SCHOOL SYSTEM.**

► Mail the completed form along with a \$55.00 evaluation fee to the

Public Schools of North Carolina
State Board of Education – Department of Public Instruction
Licensure Section
6365 Mail Service Center
Raleigh, North Carolina 27699-6365

You may pay by personal check, money order, or certified check (made payable to the Department of Public Instruction) or by Visa or MasterCard. To pay by credit card, fill out the credit card payment form.

Payment refused for checks or credit cards will result in nullifying licensure actions.

Please do not fold, staple, or use paper clips to organize these materials. Doing so will slow down the automated application process and delay your response. Please mail the documents in a 9" x 12" envelope. Thank you.

Public Schools of North Carolina
State Board of Education
Department of Public Instruction
Licensure Section
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Februaury 2003

Postsecondary Educator Experience Credit: How to Apply

- ▶ **Postsecondary educator experience is defined as teaching in an institution of higher education such as:** community college, technical institute/college, junior college, senior college, or university.
- ▶ **For experience as a professional educator at the postsecondary level:**
Have Form CE (Verification of Postsecondary Experience) completed by your former employer. (If you are submitting experience from more than one employer, have each one fill out a separate form. Duplicate Form CE as needed.) Please note that a minimum of one-half time or more (six class hours taught per week) is required to qualify for experience credit. Full-time experience credit requires a minimum of twelve class hours taught per week.

All requested information must be supplied. Beginning and ending dates for each term taught must include month, day, and year. Total class hours **taught per week** must be specified. Employers must provide their signature, title, address and telephone number.

- ▶ Mail the completed form along with a \$55.00 evaluation fee to the

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State Board of Education – Department of Public Instruction
Licensure Section
6365 Mail Service Center
Raleigh, North Carolina 27699-6365

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State Board of Education
Department of Public Instruction
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Raleigh, North Carolina 27699-6365

February 2003

VERIFICATION OF NONTEACHING EXPERIENCE

last name	first name	middle name	maiden
street address		city	state
social security number			

A	Work (nonteaching) Experience (to be completed by employer)			
Employer	Beginning date of employment (month, day, year)	Ending date of employment (month, day, year)	Total hours worked per week	Position title (Please attach official job description)

I certify that this verification of experience omits leave of absence periods and that all information is complete and correct according to the official records of this business.

signature of personnel administrator	date	address
title	telephone	city, state, and zip code

To the employer:

Please return this form to the employee. Do not send it directly to the Licensure Section.

Form NE: Instructions

To the applicant:

Fill out the personal information at the top of the form. Then send a separate Form NE (duplicate as needed) to each former employer where you worked in a nonteaching position that is directly applicable to your area of licensure.

Have the employer fill in Box A *and return the form to you*. All requested information must be supplied. Please note that beginning and ending dates must include month, day, and year and that employers must indicate total hours worked per week. They must also provide their signature, title, organization name, address, and telephone number, *and attach an official job description*.

DO NOT SEND THIS FORM TO THE LICENSURE SECTION

Send this form and job description to the personnel administrator in your employing North Carolina school system, along with the \$55.00 processing fee (personal check, money order, or certified check made payable to the Department of Public Instruction) or Form CC (if payment is being made by Visa or MasterCard).

Payment refused for checks or credit cards will result in nullifying licensure actions.

Your personnel administrator will determine the amount of credit to be recommended for the experience and submit appropriate documentation and your fee to the Licensure Section.

Please do not fold, staple, or use paper clips to organize these materials. Doing so will slow down the automated application process and delay your response. Please place the unfolded individual pieces of the application in a 9" x 12" envelope. Thank you.

LICENSE UPDATE

Type or print the following information.

(See instructions on reverse side.)

last name	first name	middle name	maiden
street address	city	state	zip code
social security number	school unit (if employed in N. C.)		

Check the action you are requesting.

change name

name as it now appears on the license

delete an area of licensure

area to be deleted (name and code)

change social security number

SSN as it now appears on the license

renew license

validate an expired license

clear a provisional area

area to be cleared

school year

Superintendent or Designee

date

STATEMENT OF APPLICANT

Have you ever had a certificate or license revoked or suspended by any state or other governing body? If yes, attach a statement giving full details and official documentation of the action taken.

yes no

Have you ever been convicted of a crime (excluding minor traffic violations)? If yes, you must submit court documents that indicate judgment and disposition of the case from the court of conviction and an explanation of the incident(s).

yes no

I certify that the information provided in this application is correct and true. I understand that the falsification of any statement or document will result in the revocation of my North Carolina license.

Signature _____

Public Schools of North Carolina
State Board of Education
Department of Public Instruction
Licensure Section
6365 Mail Service Center
Raleigh, North Carolina 27699-6365

Date _____

Form U
February 2003

Form U: Instructions

This License Update should be submitted for the following actions:

- change in social security number
- clearance of a provisional area added by a Licensure Section evaluation
- deletion of an area of licensure
- name change
- renewal of a license
- validation of an expired license (**Validations can be requested only by an employing school system, not by individuals.**)

Follow these instructions for filing the License Update:

1. Fill in current personal information (please print or type).
2. Identify the North Carolina school system that employs the applicant (if applicable).
3. Check the block that corresponds to the desired action, and fill in the requested information.
4. Answer the questions under Statement of Applicant only for license renewals and requests for validation (requests for validation must come from employing school systems).
5. Sign and date the application. [All requests from school systems must be signed and dated by the superintendent or designee. Requests from individuals must be signed and dated by the applicant under Statement of Applicant.]
6. Collect the necessary supporting materials for the request:
 - **change in social security number:** Form U. No documentation or fee is required if an error was made by the Licensure Section or if the applicant is employed in a North Carolina school system. If the error is the applicant's and the applicant is not employed by a North Carolina school system, a processing fee (\$30) and a copy of the social security card must be submitted.
 - **clearance of a provisional area added by a Licensure Section evaluation:** Form U, original transcripts or documentation of credits earned, and Praxis scores (if a test or subject assessment was required). **Note: Grade reports are not accepted in place of transcripts.**
 - **deletion of an area of licensure:** Form U.
 - **name change:** Form U, copy of court order if name was changed by legal action. No official documentation is required if a name change results from marriage. No fee is charged if the request comes from an employing school system. Requests from individuals require a \$30 fee. **Do not request a name change unless the change results from marriage or legal action.**
 - **renewal of a license:** Form U, transcripts or certificates of credit, and processing fee (\$55). **Note: Grade reports are not accepted in place of transcripts.**
 - **validation of an expired license:** Form U, Form N, processing fee (\$55).
7. Mail the completed License Update, supporting materials, and fee to the

Public Schools of North Carolina
State Board of Education
Department of Public Instruction
Licensure Section
6365 Mail Service Center
Raleigh, North Carolina 27699-6365

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Please do not fold down the corners of pages or use staples or paper clips to secure the application materials. Doing so will slow down the automated application process and delay your response. Mail the unfolded materials in a 9" x 12" envelope. Thank you.

VERIFICATION BY INSTITUTION: COMPLETION OF APPROVED EDUCATION PROGRAM

TO THE APPLICANT: Fill in the information above the line. Please type or print.

last name	first name	middle name	maiden name
street address		city	state
social security number			

**TO THE DESIGNATED COLLEGE OFFICIAL:
Fill in ONE of the boxes and BOTH sections at the bottom of the page.**

The applicant completed requirements for the

<input type="checkbox"/> bachelor's	<input type="checkbox"/> master's
<input type="checkbox"/> sixth year (educational specialist)	<input type="checkbox"/> doctorate

degree and **finished an approved education program** in the licensure area(s) of (e.g. elementary education, music, secondary mathematics, etc.)

Date program completed: _____
month, day, year

The applicant did not earn a degree from this institution but completed an approved education program at the degree level of

<input type="checkbox"/> bachelor's	<input type="checkbox"/> master's
<input type="checkbox"/> sixth year (educational specialist)	<input type="checkbox"/> doctorate

in the area(s) of (e.g. elementary education, music, secondary mathematics, etc.)

Date program completed: _____
month, day, year

The program completed meets the following accreditation, approval, or program requirements (check all that apply):

- National Council for Accreditation of Teacher Education (NCATE)
- National Association of State Directors of Teacher Education and Certification Standards (NASDTEC)
- Education program approval by the state of _____
- Regional accreditation by (name of body) _____

The applicant completed an education program approved in the area(s) and at the level(s) recommended. The approval program was in effect during the applicant's period of study.

name of institution

designated official (licensure officer, dean of education)

title

signature

date

LICENSURE SECTION CREDIT CARD PAYMENT Authorization

Visa

MasterCard

Account Number

□□□□-□□□□-□□□□-□□□□

Expiration Date (month, day, year) _____/_____/_____

I authorize the Licensure Section of the Department of Public Instruction to charge the processing fee for licensing (\$30; \$55; \$85; _____ [other amount]) to my credit card account.

last name

first name

middle name

maiden

social security number

Signature _____

Date _____