Application for RENEWAL Licensure

Applicants may submit applications for multiple licenses at the same time and pay the higher of the processing fees. An application and processing fee are valid for 1 year from date of receipt. The processing fee is non-refundable.

http://webnew.ped.state.nm.us/bureaus/licensure/

<table>
<thead>
<tr>
<th>All applications for licensure Renewal must include the following to be considered complete</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Application processing fee of $95.00 in the form of a cashier’s check or money order made out to the “New Mexico Public Education Department.” (see current Fee Schedule)</td>
</tr>
<tr>
<td>2. Application form, completed in full, signed, and dated.</td>
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<tr>
<td>3. Please submit official sealed transcripts only if you are adding a new endorsement. *Please keep in mind, a consultant may request for official transcripts if an existing transcripts on file is unreadable.</td>
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<tr>
<td>4. A Superintendent’s Recommendation Form verifying you have satisfactorily demonstrated competencies</td>
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<tr>
<td>5. OR</td>
</tr>
<tr>
<td>6. A notarized letter attesting that you have not been employed and used your New Mexico license(s) during the life of the license(s).</td>
</tr>
</tbody>
</table>

Note: If a background expires, a new background check must be completed for licensure. For information on how to complete a background please visit: http://webnew.ped.state.nm.us/officesandprograms/licensure/background-submission/

- Personal Checks will NOT be accepted
- Processing fees are non-refundable
- Money Order/Cashier’s Check payable to “New Mexico Public Education Department.”

INCOMPLETE APPLICATIONS WILL BE RETURNED
# APPLICATION FOR NEW MEXICO CONTINUING LICENSURE

Use **Black Ink** to complete this form. Please print legibly.

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
<th>Former Name(s)</th>
</tr>
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<thead>
<tr>
<th>Street Number or PO Box</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
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<tr>
<th>Phone Number</th>
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<tr>
<th>Date of Birth (MM/DD/YY)</th>
<th>Sex (M-F)</th>
<th>Social Security No.</th>
</tr>
</thead>
</table>

## Teacher Licensure Opportunities for Veteran, Military Service Members and Military Service Spouses

- **Check** if you or your spouse is an active military member. *Please attach a copy of military identification card, your marriage license and a copy of your spouse’s current orders for mobilization/deployment.*

## Check level of license(s) and types of license(s) that are being renewed

- **[ ]** Level 1
- **[ ]** Level 2
- **[ ]** Level 3
- **[ ]** Level 3A
- **[ ]** Level 3B

### Administrative/Teaching Licenses

- **[ ]** Administration, Pre K-12
- **[ ]** Early Childhood, B-3
- **[ ]** Elementary, K-8
- **[ ]** Special Education, Pre K-12
- **[ ]** Middle Level, 5-9 **
- **[ ]** Secondary, 7-12
- **[ ]** Grades Pre K-12 **
- **[ ]** Birth-Pre K
- **[ ]** Pre K-Grade 3
- **[ ]** Secondary Vocational-Technical, 7-12
- **[ ]** Blind & Visual Impairment, B-12

### Instructional Support Providers

- **[ ]** Educational Diagnostician
- **[ ]** Physical Therapist Assistant **
- **[ ]** School Nurse (LPN) **
- **[ ]** Educational Interpreter ft/Deaf **
- **[ ]** Professional Interpreter ft/Deaf **
- **[ ]** SchoolPsychologist
- **[ ]** Mobility Trainer for the Blind **
- **[ ]** Recreational Therapist **
- **[ ]** School Social Worker **
- **[ ]** Occupational Therapist **
- **[ ]** School Counselor
- **[ ]** Speech Language Pathologist **
- **[ ]** Occupational Therapist Assistant **
- **[ ]** School Nurse (RN) **
- **[ ]** Vocational Rehabilitation Counselor
- **[ ]** Physical Therapist **
- **[ ]** Audiologist **
- **[ ]** Audiology **

**Attach a copy of a current NM or National board license or certificate.**

### Support Providers

- **[ ]** Athletic Coach, 7-12
- **[ ]** Educational Assistant, Pre K-12
- **[ ]** School Health Assistant, Pre K-12
- **[ ]** Substitute Teacher, Pre K-12
- **[ ]** Native American Language & Culture Certificate

**Attach a copy of verification from Tribe or Pueblo**

### School Business Official

- **[ ]** School Business Official

**Attach a copy of verification of (16) contact hours per year of training or coursework**

### Endorsements

- **[ ]** Agriculture
- **[ ]** Information Technology Coordinator
- **[ ]** Physical Education
- **[ ]** Bilingual **
- **[ ]** Language Arts
- **[ ]** Psychology
- **[ ]** Business
- **[ ]** Library/Media
- **[ ]** Reading
- **[ ]** Family & Consumer Science
- **[ ]** Mathematics
- **[ ]** Science
- **[ ]** Gifted Students
- **[ ]** Modern, Classical & Native Language
- **[ ]** TESOL (Spanish, German, French, etc.)
- **[ ]** Health
- **[ ]** Performing Arts
- **[ ]** Visual Arts Economics, (Music, Theater, Dance)
- **[ ]** History, Geography, Civics & Government
- **[ ]** Technology Education

**Needs to pass a language proficiency exam in the target language, i.e. Preueba de Español para Certificación Bilingüe for Spanish Bilingual**
CHARACTER AND FITNESS

Please complete the following questions carefully and completely before providing information and signing the oath. Any falsification or deliberate misrepresentation, including omission of a material fact, in completion of this application can be grounds for denial of certification, or in the case of a certificate holder, reprimand, suspension, or revocation of the educational license.

1. Have you ever had adverse action taken against any certificate or license in New Mexico or any other state? (Adverse action includes letter of warning, reprimand, denial, suspension, revocation, voluntary surrender, or cancellation.)  □ Documentation previously provided on this item. □ YES □ NO

2. Have you ever had an application for a license, permit, credential, or other document authorizing school service or teaching denied or rejected for disciplinary reasons in New Mexico or any other state?
   □ Documentation previously provided on this item. □ YES □ NO

3. Have you ever been disciplined, reprimanded, suspended, or discharged, from any employment because of allegations of misconduct?
   □ Documentation previously provided on this item. □ YES □ NO

4. Have you ever resigned, entered into a settlement agreement, or otherwise left employment following an allegation of misconduct?
   □ Documentation previously provided on this item. □ YES □ NO

5. Is any action now pending against you for alleged misconduct, including application discrepancies, in any school district, court, or before any educator-licensing agency?
   □ Documentation previously provided on this item. □ YES □ NO

6. Have you ever failed to fulfill the terms of a teaching or administrative contract? (Resigning from employment, if proper notice was given, does not constitute failure to fulfill a contract.)
   □ Documentation previously provided on this item. □ YES □ NO

   If you answered “yes” to any of the questions 1-6 above, please provide a complete narrative description of the details about your answer(s) on a separate sheet, including dates, places, school systems, and circumstances.

7. Do you currently have any outstanding criminal charges, warrants of arrest, or conditions of probation pending against you in New Mexico or in any other state?
   □ Documentation previously provided on this item. □ YES □ NO

   CAUTION: Consider your answer to the following question (#8) carefully. Answer “yes” if you have ever been fingerprinted as the result of any arrest or detainment, even if the charges were later dismissed. The question is about ever having been fingerprinted, not about the disposition of a case.

8. Have you ever been fingerprinted as a result of any arrest or detainment for any crime or violation of the law?
   □ Documentation previously provided on this item. □ YES □ NO
9. Have you ever pled guilty to, or been convicted of, any crime or violation of law, including entering a plea of *nolo contendere* or receiving a deferred or suspended sentence? (For purposes of this application, minor traffic citations should not be reported. Convictions for driving while intoxicated (DWI) or driving under the influence of alcohol or other drugs (DUI), however, must be reported.)

- Documentation previously provided on this item. □ YES    □ NO

10. Are you currently delinquent in payment of court-ordered child support?

- Documentation previously provided on this item. □ YES    □ NO

If you answered "yes" to any of the questions 7-10 above, please provide a complete narrative description of the details about your answer(s) on a separate paper, including the nature of the offense, charge, warrant or condition, the name and location of the arresting agency, if any, and the date of any arrest. Also provide relevant court disposition papers including a complete copy of the judgment and sentence and the status of the case, restitution, payment of fines and/or court costs, and satisfactory completion of the sentence. If court documents are not available, submit a letter from an official of the court certifying that documents are not available.

11. Have you ever had a court-ordered screening for alcohol or drug dependence?

- Documentation previously provided on this item. □ YES    □ NO

If you answered “yes” to question 11 above, contact the appropriate agency and request that a copy of the alcohol or drug dependence screening is forwarded to our office. Also, provide evidence of completion of any such treatment, counseling, or alcohol and drug instructional program.

**OATH**

FALSE STATEMENTS OR OMISSIONS ARE CAUSE FOR DENIAL, SUSPENSION, OR REVOCATION OF LICENSURE

I, ____________________________ swear or affirm under the penalty of perjury that all information I submitted in this application is true, correct, and complete to the best of my knowledge, information, and belief. I understand that any material misrepresentation or material omission of fact in this application is grounds for denial, suspension, or revocation of the educator license(s) that I am seeking. Should a license be issued in error I understand PED has the option to rescind my license.

_________________________________  _______________________
Signature of the Applicant                  Date