



Massachusetts Department of Elementary and Secondary Education

Office of Educator Licensure
75 Pleasant Street, Malden MA 02148

Telephone: (781) 338-6600
TTY: N.E.T. Relay (800) 439-2370

Application for Professional License Renewal Academic/PreK-12 and Vocational Technical

Mail completed application form to:

Massachusetts Department of Elementary & Secondary Education

Attention: License Renewal · Office of Educator Licensure · 75 Pleasant Street, Malden, MA 02148

Telephone: 781/338-6600 TTY: 800343930183

Website: www.mass.gov/ese/licensure

SECTION 1. Personal Information			
Name (<i>last, first, middle</i>):			
Previous name (<i>if applicable</i>):			
Note: To update your name, you must mail in proof of name change (i.e., copy of MA Driver's License or Marriage/Divorce Certificate).			
Date of birth:	SSN:	MA Educator License # or MEPID:	
Address:			
City:	State:	ZIP Code:	
Daytime Telephone:	Email:		
RENEWAL REQUIREMENTS – Professional Development Points (PDPs)			
Note: Only Professional Licenses that are approaching their expiration dates or those that are currently inactive or invalid are eligible for renewal.			
ACADEMIC PROFESSIONAL LICENSE			
<p>Primary Area: A minimum of 150 PDPs. Of the 150, a minimum of 120 points must be in content/pedagogy of the Primary Area. Of these 120, a minimum of 90 points must be in content; 30 may be in pedagogy. The remaining 30 points from the 150 may be in any educational elective.</p> <p>Each Additional Area: (Field or Grade level) A minimum of 30 PDPs must be in content. To renew an Additional Area that is in an Invalid status requires 150 PDPs.</p> <p>Chapter 71 Renewal Guidelines: http://www.mass.gov/ese/licensure/renew</p> <p>For ACADEMIC PROFESSIONAL LICENSE - PLEASE NOTE: If you are renewing a primary license with an expiration date/renewal date of July 1, 2016 (or later), upon attesting to having satisfied the requirements of license renewal, you are attesting to having at least 15 professional development points (PDPs) in Sheltered English Immersion or English as a Second Language AND 15 PDPs in strategies for effective schooling for students with disabilities and instruction of students with diverse learning styles. Renewing a license "early" (prior to July 1, 2016) does not permit you to renew the license without having completed these required areas of professional development.</p>			
VOCATIONAL TECHNICAL PROFESSIONAL LICENSE			
<p>Primary Area (Teachers): A minimum of 150 PDPs. 10 points must be in subject matter, knowledge and skills; 10 points must be in pedagogy; 10 points must be in academic and technical curriculum integration; and 10 points must be in safety and health. Current state and/or national license, if required, for the particular teacher license.**</p> <p>Primary Area (Administrators): A minimum of 150 PDPs in the following areas: supervision; school law; school finance; labor relations; safety and health; curriculum; labor laws.**</p> <p>Each Additional Area (Teachers): 30 PDPs in any of the four areas (subject matter, knowledge and skills; pedagogy; academic and technical curriculum integration and safety and health). Current state and/or national license, if required, for the particular teacher license.**</p> <p>Each Additional Area (Administrators): 30 PDPs in any of the following areas specific to your license: supervision, school law, school finance, labor relations, safety & health curriculum, labor laws.**</p> <p>**Refer to Chapter 74 Guide for Professional Vocational Technical Educator License Renewal for specific license(s) http://www.mass.gov/ese/licensure/voctech</p>			
SECTION 2. Professional Development Plan			
Educators employed in a Massachusetts public school district must receive Initial Plan Approval within three months from the date the professional license was issued or renewed or within three months of beginning employment. The educator must obtain final plan approval and endorsement of the plan prior to submitting the application for renewal to the Department of Elementary & Secondary Education. Educators who are not currently employed by a Massachusetts public school district do not have to obtain approval or final endorsement of the Professional Development Plan.			
1.	Are you currently employed in the role of your Professional level license in a Massachusetts public school? (if yes, you MUST answer question 2; if no, please proceed to question 3)	<input type="checkbox"/>	yes <input type="checkbox"/>
2.	If you are currently employed in a Massachusetts public school district, has your supervisor approved your Professional Development Plan?	<input type="checkbox"/>	yes <input type="checkbox"/>
3.	I hereby state that I have satisfied all the requirements for Professional License Renewal.	<input type="checkbox"/>	yes <input type="checkbox"/>

SECTION 3. Indicate Professional License(s) for Renewal

You may apply to renew as many Professional level licenses as you wish, as long as you have completed the necessary Professional Development Points (PDPs) for each license. Each grade level is considered a separate license.

Please indicate the license(s) you wish to renew. The Primary Area will cost \$100.00. Each Additional Area will cost \$25.00.

Field (i.e., Elementary)		Grade Level (i.e., 1-6)
Primary Area:		
Additional:		
Additional:		
Additional:		

Please be sure a Primary Area is selected, unless there is one currently active and you wish to maintain it as your Primary Area. **Note:** In order to renew a license that is not designated as your Primary Area, you must have an active Primary license in place. If you wish to change your Primary license designation at the time of renewal, you must have completed the appropriate number of PDPs for your new Primary Area.

SECTION 4. Payment Information

The Primary Area will cost \$100.00. Each Additional Area will cost \$25.00

Please check one below:

		Total Paid
I am paying by:	<input type="checkbox"/> Check payable to: The Commonwealth of Massachusetts (attach to bottom left of application)	\$
	<input type="checkbox"/> Charge Card (MasterCard or VISA only) Complete the attached Charge Card Authorization Form	

SECTION 5. Affidavit/Applicant's Signature

The Massachusetts Department of Elementary & Secondary Education has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data for the purpose of screening prospective and current holders of educator licenses awarded by the Department of Elementary & Secondary Education, and for access to CORI conviction data in the context of proceedings relative to the recertification process. A criminal record check may be conducted for criminal and pending or criminal case information only, as authorized, and it will not necessarily disqualify me.

State law requires applicants for licensure to affirm certain information. Please check all of the statements below that apply. If you do not check each statement, please enclose a letter of explanation. We will then contact you and will determine your eligibility for licensure.

Since completion of my last licensure or renewal application, I certify that:

- I have never appeared in any federal or state court in the Commonwealth of Massachusetts or any other commonwealth, state, district, territory or country as a defendant for any criminal offense. (You must leave this blank and provide an explanation regardless of the outcome of the case if you appeared as a defendant. Generally speaking, any process before a court where you are required to enter a plea or where you could be placed on probation prior to entering a plea is considered an appearance as a defendant. Failure to disclose criminal court appearances will be grounds for license denial or revocation.)
- I have not been identified by any child protection agency as a perpetrator of child abuse or neglect.
- I have not been dismissed for cause from any position I held.
- I have not been asked to resign from any position or resigned from any position while under investigation or as a result of discipline.
- I have not had a professional license or certificate denied, revoked, suspended, surrendered or annulled, and no action is pending to revoke or suspend any professional license or certificate I hold.
- In accordance with MA General Laws Chapter 62C, § 49A, I have filed all state tax returns and paid all Massachusetts taxes required by law, and I am in compliance with all Massachusetts laws relating to payment of child support. **Note:** If you have not resided or earned income in Massachusetts, in most cases, you do not owe any Massachusetts income tax and can answer the above question in the affirmative. If you are unsure about the correct answer, please consult a tax professional before you leave this question blank.
- I have read MA General Laws Chapter 119, §51A, which requires educators and others who are paid to care for or work with children to make a report immediately to the Department of Social Services or to the person in charge of the school or institution if there is reasonable cause to believe a child under 18 is suffering physical or emotional injury as a result of abuse, including sexual abuse, or neglect. I understand my obligations under §51A and the penalties for failure to comply.
- I understand and acknowledge that as a condition of holding an educator license, a criminal background check may be conducted for criminal and pending case information as authorized by the Criminal History Systems Board and that a criminal record will not automatically disqualify me.
- This application contains no misrepresentations or falsehoods. I understand that misrepresentations or falsehoods may be cause for denial or revocation of my educator license.
- I understand that I must notify the Commissioner of the Massachusetts Department of Elementary & Secondary Education in writing within ten days if in the future the answers to any of these questions change.

Attach a separate page to explain any unchecked items.

Please Print Your Full Name:

Signed under penalties of perjury:	Date:
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Charge Card Authorization form: MASTERCARD and VISA accepted

Please complete all areas of this form so that we may process your payment in a timely manner. Please type or print.
**Please do not upload this form to your ELAR account or fax this form to the Office of Educator Licensure.*

1. Applicant Information

Applicant's Full Name: _____
Applicant's Social Security Number: _____ Or MEPID _____

2. Card Holder Information

Card Holder's Last Name _____ Card Holder's First Name _____ MI _____
Card Holder's Address, Street and Apartment Number (if any) _____
Card Holder's City/Town _____ State _____ Zip Code _____

3. Credit Card Information

Please check the credit card you are using to process your payment:
 MASTERCARD VISA
ACCOUNT # _____ Expiration Date (Month/Year): _____

FEES:

\$100.00 for "First" License/Primary Area
\$25.00 for each additional license

Total Payment \$ _____

Credit Card Holder's Signature _____ Date _____