



# EDUCATOR LICENSURE REQUEST



To initiate a university recommendation, complete this educator licensure request form:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Current Address, City, State, Zip: \_\_\_\_\_

Last 4-digits of SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Former Name(s), if any: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

Select the educator license you are requesting:

**Cl. 2 Standard Teacher License**

I hold a bachelor's degree and completed a teacher education program on: \_\_\_\_\_

What is your major endorsement area(s)? \_\_\_\_\_

What is your minor endorsement area(s), if any? \_\_\_\_\_

Select the license endorsement area you are requesting:

If more than one endorsement area(s), enter here: \_\_\_\_\_

Have you taken the Praxis subject assessment exam?  Yes  No

If no, STOP. We cannot move forward with the educator licensure request. Once you've taken the Praxis submit a new Cl. 2 Initial Educator Licensure Request.

Have you submitted the OPI educator license application and fee?  Yes  No

If no, STOP. The FPLO cannot make a university recommendation for licensure without submission of the OPI application and fee payment. Once you've submitted the application and fee to OPI submit a new Cl. 2 Initial Educator Licensure Request.



**Cl. 3 Administrator License**

**Principal K-12**

Anticipated/Completion date of MSU Master's Educational Leadership program: \_\_\_\_\_

Other, I completed my degree on: \_\_\_\_\_

Have you taken the Praxis subject assessment exam?  Yes  No

If no, STOP. We cannot move forward with the educator licensure request. Once you've taken the Praxis submit a new Educator Licensure Request.

Have you submitted the OPI educator license application and fee?  Yes  No

If no, STOP. The FPLO cannot make a university recommendation for licensure without submission of the OPI application and fee payment. Once you've submitted the application and fee to OPI submit a new Educator Licensure Request.

**Superintendent**

Anticipated completion of Superintendent Certificate: \_\_\_\_\_

Other, I completed my degree on: \_\_\_\_\_



**Cl. 6 School Counselor**

Anticipated completion date of Master in School Counseling program: \_\_\_\_\_

Other, I completed my degree on: \_\_\_\_\_

Have you submitted the OPI educator license application and fee?  Yes  No

If no, STOP. The FPLO cannot make a university recommendation for licensure without submission of the OPI application and fee payment. Once you've submitted the application and fee to OPI submit a new Educator Licensure Request.



Please submit this educator licensure request form to the attention of our Licensure Technician, Rosemary Madero, by email, [rosemary.madero@montana.edu](mailto:rosemary.madero@montana.edu), or fax, (406) 994-1950. If you have any questions, please contact Rosemary, (406) 994-4761, for further assistance.