

Application for Voluntary Surrender

General Information and Instructions

Minnesota Rules 8710.0700 allows individuals holding a license granted by PELSB the ability to voluntarily surrender their license(s).

Materials required to surrender license:

- The Application for Voluntary Surrender, listing the license or licenses to be surrendered
- The signed verification that the District or Charter School has been notified, including the copy of your license the district or charter school held
- The copy of your license
- A check or money order for \$57.00 payable to “PELSB” (this is a nonrefundable fee)

Surrender date:

- All applications submitted by December 31 will be processed on the following July 1
- Applications submitted after December 31 will be processed July 1 of the following year (for example, applications received on January 15, 2019 will be processed on July 1, 2020)

When surrender is prohibited:

- The employing school board has begun proceedings to terminate the continuing contract
- The Professional Educator Licensing and Standards Board has begun proceedings to suspend or revoke the license being surrendered
- Any educational agency or board has begun proceedings that could alter the status of the license being surrendered

A person who has surrendered a Minnesota license may apply for a first professional licensure in the surrendered field under the following conditions:

- A licensure rule exists for the previously surrendered licensure field or subject
- The person meets the standards and Professional Educator Licensing and Standards Board rules in effect at the time of application
- The nonrefundable processing fee accompanies the first professional licensure application

Copied or electronic signatures are NOT Accepted. All signatures must be original.

Applicant Information

Minnesota File Folder Number: _____ Register Number (for state use only): _____

Last Name: _____ First Name: _____

Middle Name: _____ Previous Name: _____

Mailing Address: _____

City, State, Zip Code: _____

Telephone Number: _____ Email address (required): _____

Social Security Number: _____ Birthday (mm/dd/yyyy): _____

Identification of License(s) to be Voluntarily Surrendered

The educator license(s) issued by the Minnesota Professional Educator Licensing and Standards Board in the following fields will be voluntarily surrendered:

First license: _____ Second license: _____

Third license: _____ Fourth license: _____

Verification of District or Charter School Notification

I hereby verify that I have been notified of this request for voluntary surrender of an educator license, that the school district copy of the license has been removed from the school file and attached to this form, and that no proceedings to terminate the continuing contract of the applicant have been commenced by the local school board.

Signature of District or Charter School Authorized Administrator or Representative

Date

District or Charter School Name

District or Charter School Number

Note: The voluntary surrender of this license is NOT contingent upon school district approval, the signature of the district or charter school administrator is required as evidence that the district or charter school has been notified of the applicant's intent.

Applicant Signature

I hereby verify that the information on this application is complete and correct and that I would like the listed license(s) to be surrendered on July 1 following the December 31 by which this application was submitted. I have submitted my nonrefundable processing fee of \$57.00.

Signature of Applicant

Date

FOR STATE USE ONLY

I hereby verify that no proceedings to suspend or revoke the license(s) held by the applicant have been commenced by the Professional Educator Licensing and Standards Board.

Signature of Professional Educator Licensing and Standards Board Representative

Date