HOW TO APPLY

Applicant:

- Fill in current personal information (please print or type).

Approved Educator Preparation Program Dean/Associate Dean or Licensure Officer:

- Complete one (1) of the boxes in the center section of this form
- Check the regional accreditation, state approval and program requirement boxes at the bottom of this form
- Sign form verifying the above
- Include email address

Submitting the form:

- Submit a completed copy of Form V, along with all other required documentation and evaluation fees, online at https://vo.licensure.ncpublicschools.gov/. Application instructions and additional information are available within the online licensure system.
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
zip code
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
☐ bachelor’s
☐ master’s
☐ six year
☐ doctoral (educational specialist)

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

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
☐ bachelor’s
☐ master’s
☐ six year
☐ doctoral (educational specialist)
in the area(s) of (e.g. elementary education, music, secondary
mathematics, etc. as stated on lines below)

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/TEAC/CAEP)
☐ 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 approved program
was in effect during the applicant’s period of study.

name of institution
designated official (licensure officer, dean of education)
title
signature
date
email address

Form V
August 2019