



Illinois State Board of Education

100 North First Street, E-240
Springfield, Illinois 62777-0001



REQUEST FOR TEMPORARY SOCIAL SECURITY NUMBER FOR ELIS ACCOUNT CREATION

EDUCATOR EFFECTIVENESS DEPARTMENT

DIRECTIONS: This form shall be used by individuals who do not hold a Social Security number and are requesting a temporary one for the purposes of creating an ELIS account and applying for Illinois licensure. This temporary number is not valid for any purposes other than creating an ELIS account. The requesting educator must complete all fields on this form.

Submit the completed form to (licensureforms@isbe.net).

SECTION I - APPLICANT INFORMATION

NAME (Last, First, Middle, Maiden)	BIRTHDATE (mm/dd/yyyy)
ADDRESS (Street, City, State/Province, Zip Code/Postal Code)	TELEPHONE NUMBER (Include Area Code)
	E-MAIL
<input type="checkbox"/> Check this box if you will enter on a J-1 visa as an exchange visitor.	
ADDITIONAL COMMENTS	

SECTION II - FOR ISBE USE ONLY

TEMPORARY SOCIAL SECURITY NUMBER ASSIGNED	DATE NUMBER ASSIGNED
---	----------------------

Typed or Printed Name of Authorized Personnel

Date

Digital or Original Signature of Authorized Personnel