



# Illinois State Board of Education

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



## REQUEST FOR PRE-APPROVALS OF COURSEWORK / REQUEST FOR RE-EVALUATION OF COURSEWORK

### EDUCATOR EFFECTIVENESS DEPARTMENT

**Directions:** Complete Section I or II, as applicable. Please print or type. Attach any required documentation to this form and mail to the address above or email the form and documentation as a PDF to [licensureforms@isbe.net](mailto:licensureforms@isbe.net).

NAME (Last, First, Middle, Maiden)	IEIN	BIRTHDATE (mm/dd/yyyy)
ADDRESS (Street, City, State, ZIP Code)	TELEPHONE (Include Area Code)	
	EMAIL	

### SECTION I - PRE-APPROVAL OF COURSEWORK

This section is to request pre-approval of coursework the educator would like to take to fulfill a deficiency. An application for the credential must already be on file at the Illinois State Board of Education (ISBE).

The educator may submit up to three course descriptions with this form for pre-approval. Additional pre-approvals will not be granted until the educator submits an official transcript showing completion of coursework for the deficiency.

Attach official course descriptions (a copy from the course catalog or a printed screenshot of the online course catalog) to this form. Unofficial course descriptions will not be accepted.

This pre-approval is for the \_\_\_\_\_ license/endorsement/approval.

INSTITUTION OFFERING THE COURSE	COURSE TITLE AND NUMBER	ATTACHED OFFICIAL COURSE DESCRIPTION
		<input type="checkbox"/> Yes
		<input type="checkbox"/> Yes
		<input type="checkbox"/> Yes

### SECTION II - RE-EVALUATION OF COURSEWORK

This section is to request a second review of previously completed coursework that appears on a transcript that is already on file at ISBE for the deficiency.

The educator may submit up to three course descriptions with this form for re-evaluation. Attach official course descriptions (a copy from the course catalog or a printed screenshot of the online course catalog) to this form. Unofficial course descriptions will not be accepted.

This re-evaluation is for the \_\_\_\_\_ license/endorsement/approval.

INSTITUTION WHERE THE COURSE WAS COMPLETED	COURSE TITLE AND NUMBER	ATTACHED OFFICIAL COURSE DESCRIPTION	TRANSCRIPT ALREADY ON FILE AT ISBE
		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes