



# Illinois State Board of Education

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



## REQUEST FOR VOLUNTARY REMOVAL OF ENDORSEMENTS

### EDUCATOR EFFECTIVENESS DEPARTMENT

I understand that I may voluntarily surrender an endorsement only between January 1 and May 1 of a calendar year, and the endorsement will be removed no later than July 1 of the same calendar year. I may not request removal of any endorsement from a Professional Educator License or an Educator License with Stipulations if I am subject to an ongoing investigation conducted by the Illinois State Board of Education or there is other evidence or allegations of misconduct. I may not request the removal of the same endorsement from my Professional Educator License or Educator License with Stipulations more than once every 10 years.

**DIRECTIONS:** Return this completed form to Illinois State Board of Education at the address above. All requests must be postmarked between January 1 and May 1. There is no cost for the surrender of an endorsement.

**COMPLETE ALL SECTIONS OF THIS FORM. You may find information about your license on the "Credentials" page when you login to your Educator Licensure Information System (ELIS) account.**

NAME OF APPLICANT (As recorded in your ELIS file)	IEIN
ADDRESS (Street, City, State, ZIP Code)	TELEPHONE (Include Area Code)
	EMAIL
TYPE OF LICENSE <input type="checkbox"/> Professional Educator License <input type="checkbox"/> Educator License with Stipulations	LICENSE ID NUMBER

#### ENDORSEMENT(S) TO BE REMOVED

DESCRIPTION	GRADE	ISSUE DATE
1.		
2.		
3.		
4.		

*I certify that the information above is true and accurate to the best of my knowledge and that I am exercising my right to have the endorsement(s) listed above removed from my educator license. I understand that I may reapply for an endorsement that has been removed by paying the required fee, provided that (1) at least 10 years have passed since the endorsement was removed, (2) I have passed all tests required for the endorsement at the time of application, and (3) I meet all other requirements in effect for the endorsement at the time I make application.*

\_\_\_\_\_ Date

\_\_\_\_\_ Digital or Original Signature of Licensee