

**ILLINOIS STATE BOARD OF EDUCATION**

Educator Effectiveness Division  
100 North First Street, S-306  
Springfield, Illinois 62777-0001



**REQUEST TO EXPIRE CURRENT EVALUATION FOR LICENSURE PER PASSAGE OF ILLINOIS STATUTE**

**Instructions:** Some Illinois licensure requirements have changed per new statute Public Act 99-0058. All applications evaluated after the bill being signed will be evaluated under the new requirements. If you have a deficient evaluation on file, you still must meet the requirements detailed in your deficiency letter. If you would like ISBE staff to delete this application so you can re-apply and be evaluated under new requirements, use this form. You must e-mail your request to [licensureforms@isbe.net](mailto:licensureforms@isbe.net). Please contact your ROE for information about the new requirements.

EDUCATOR'S NAME (Last, First, Middle, Maiden)	IEIN or Social Security Number	BIRTHDAY (mm/dd/yyyy)
ADDRESS (Street, City, State, Zip Code)	TELEPHONE (Include Area Code)	
	E-MAIL	

Please expire my evaluation for:

License/Endorsement \_\_\_\_\_

Grade Level \_\_\_\_\_

Expiration Date of Evaluation \_\_\_\_\_

I wish to reapply for the same area identified above so I will be evaluated under new licensure requirements. I understand that with this request, I must submit a new application and fee through my ELIS account and meet all of the current requirements for the issuance of the license, endorsement, or approval requested. I understand I will not receive a refund for my expired application and my new application will be processed in the order it was received in relation to other applications.

\_\_\_\_\_  
*Signature of Educator*

\_\_\_\_\_  
*Date*