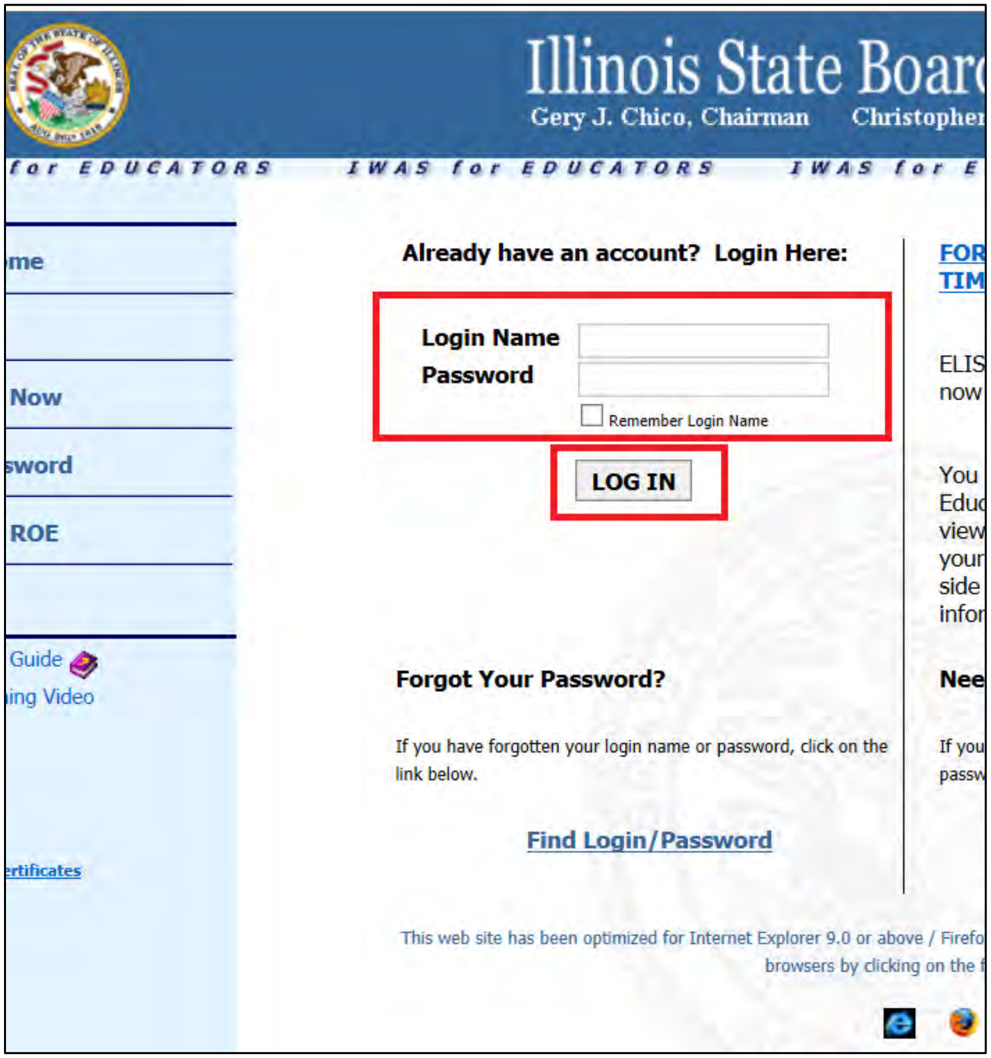
Type the link to ELIS – https://sec3.isbe.net/IWASNET/login.aspx – into the computer web browser. Type in the login name and password and click on LOG IN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LOG IN
Find Login/Password

Already have an account? Login Here:

Login Name

Password

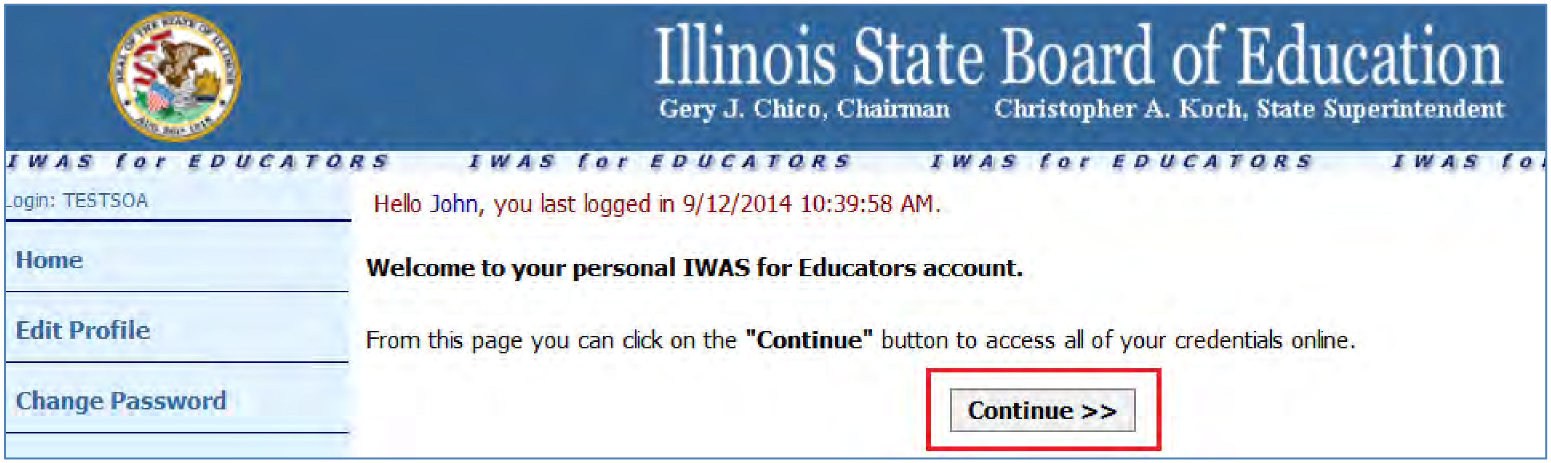
☐ Remember Login Name

Forgot Your Password?

If you have forgotten your login name or password, click on the link below.

This web site has been optimized for Internet Explorer 9.0 or above / Firefo
browsers by clicking on the f

Click **Continue >>**



Illinois State Board of Education
Gery J. Chico, Chairman Christopher A. Koch, State Superintendent
IWAS for EDUCATORS IWAS for EDUCATORS IWAS for EDUCATORS IWAS fo
Home
Edit Profile
Change Password
Continue >>

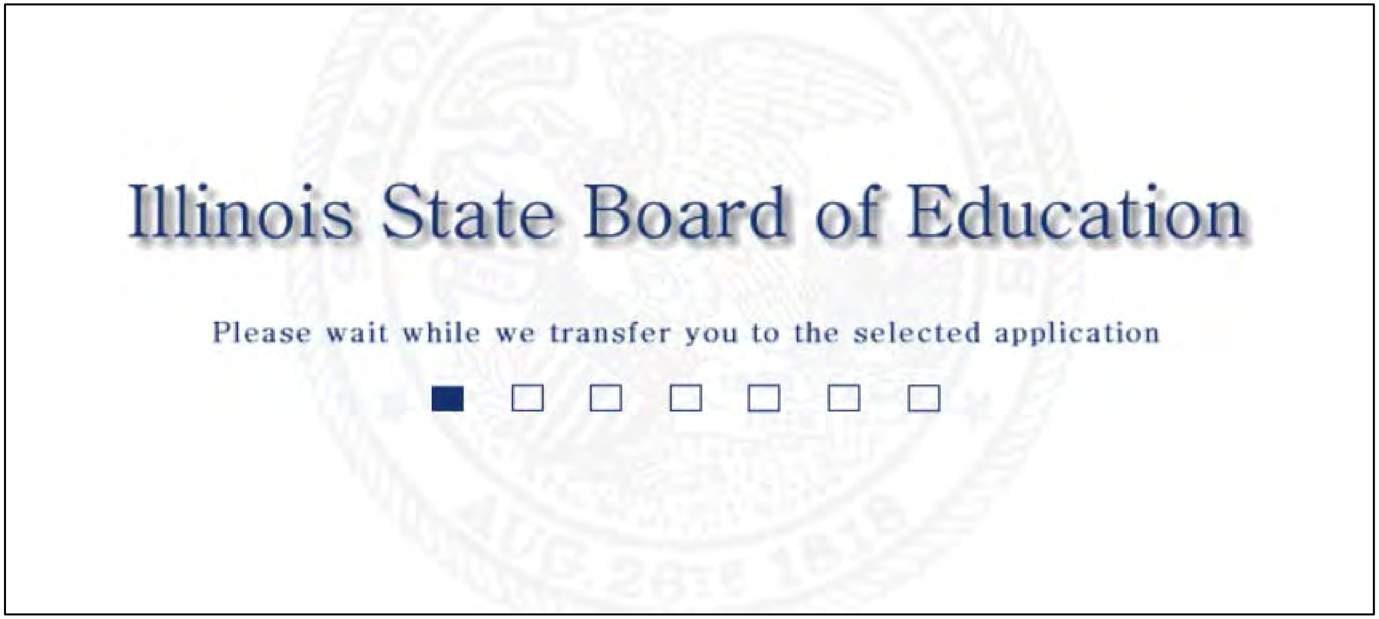
Login: TESTSOA

Hello John, you last logged in 9/12/2014 10:39:58 AM.

Welcome to your personal IWAS for Educators account.

From this page you can click on the **"Continue"** button to access all of your credentials online.

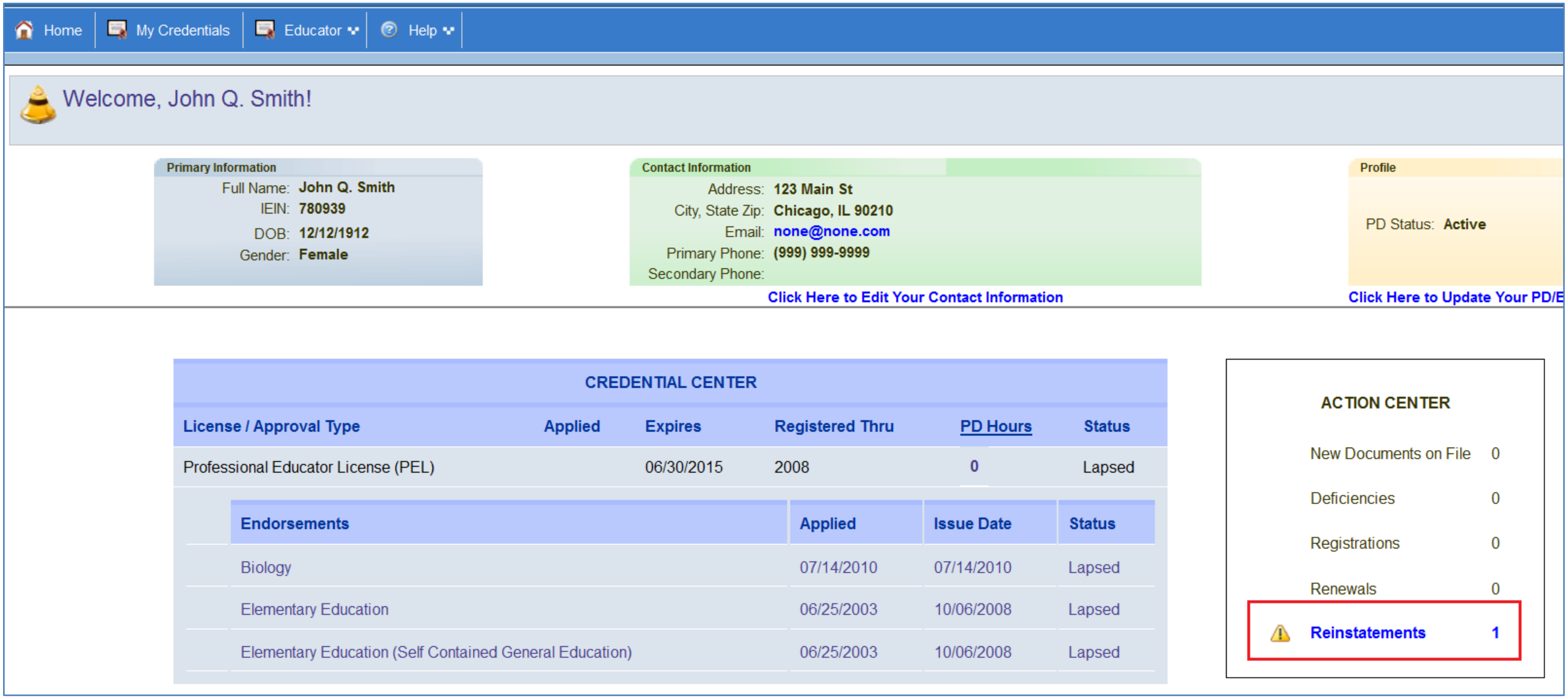
ELIS is redirecting you to your dashboard (homepage).



Illinois State Board of Education

Please wait while we transfer you to the selected application

Click on ⚠ **Reinstatements** 1



Welcome, John Q. Smith!

Primary Information

Full Name: **John Q. Smith**
IEIN: **780939**
DOB: **12/12/1912**
Gender: **Female**

Contact Information

Address: **123 Main St**
City, State Zip: **Chicago, IL 90210**
Email: **none@none.com**
Primary Phone: **(999) 999-9999**
Secondary Phone:

Click Here to Edit Your Contact Information

Profile

PD Status: **Active**

Click Here to Update Your PD/E

CREDENTIAL CENTER

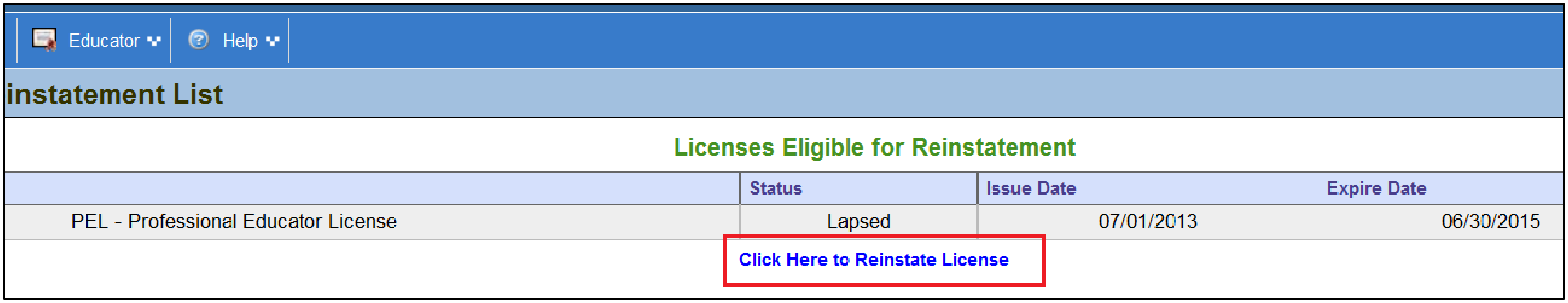
License / Approval Type	Applied	Expires	Registered Thru	PD Hours	Status
Professional Educator License (PEL)		06/30/2015	2008	0	Lapsed

Endorsements	Applied	Issue Date	Status
Biology	07/14/2010	07/14/2010	Lapsed
Elementary Education	06/25/2003	10/06/2008	Lapsed
Elementary Education (Self Contained General Education)	06/25/2003	10/06/2008	Lapsed

ACTION CENTER

New Documents on File	0
Deficiencies	0
Registrations	0
Renewals	0
⚠ Reinstatements	1

Click on **Click Here to Reinstate License**


Educator
Help

instatement List

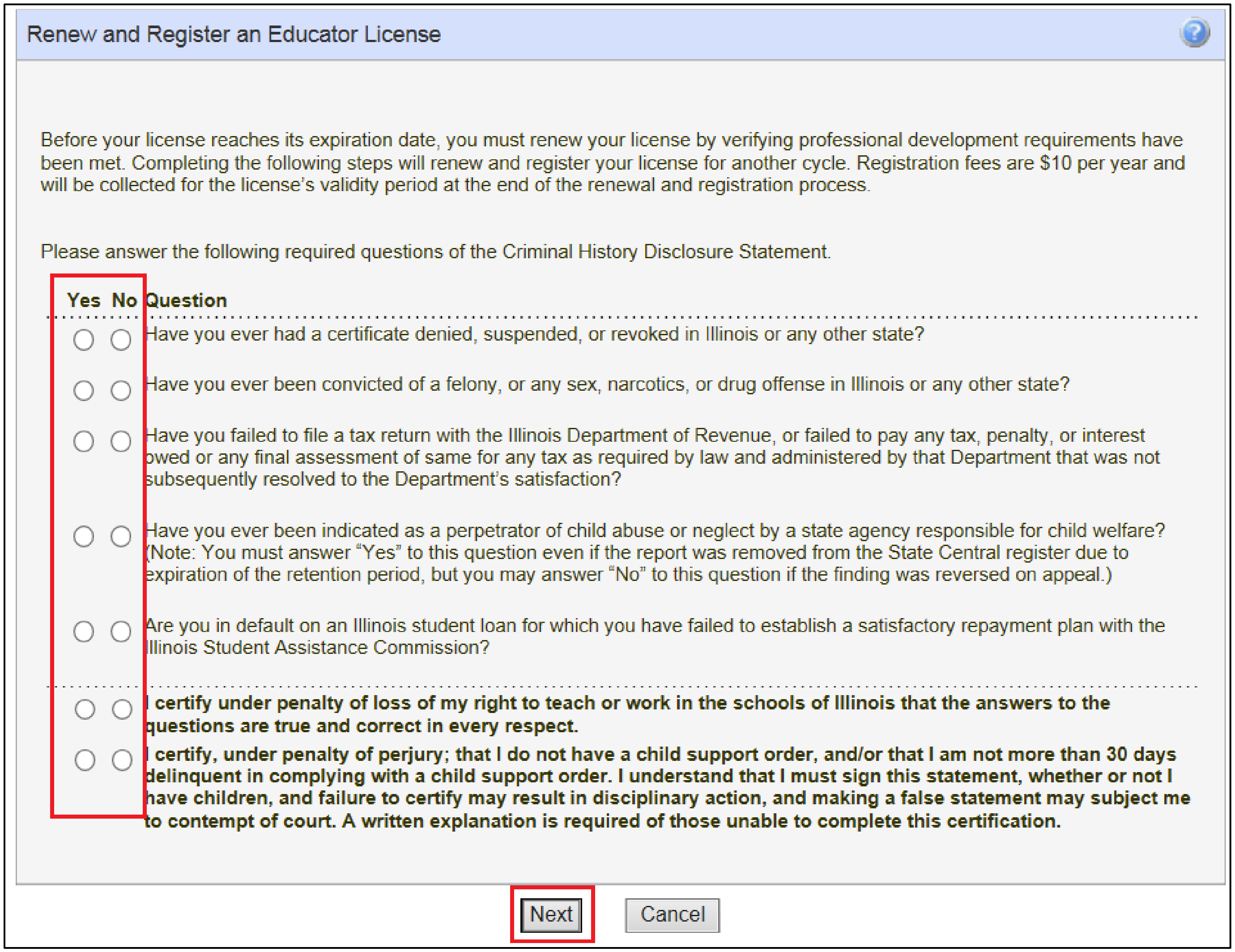
Licenses Eligible for Reinstatement

	Status	Issue Date	Expire Date
PEL - Professional Educator License	Lapsed	07/01/2013	06/30/2015

Click Here to Reinstate License

Carefully read and respond to the background questions by clicking Yes or No– click Next.

NOTE: If there are any problems related to the background questions ELIS will not reinstate the license. You will receive a deficiency notice with further instructions.



Renew and Register an Educator License

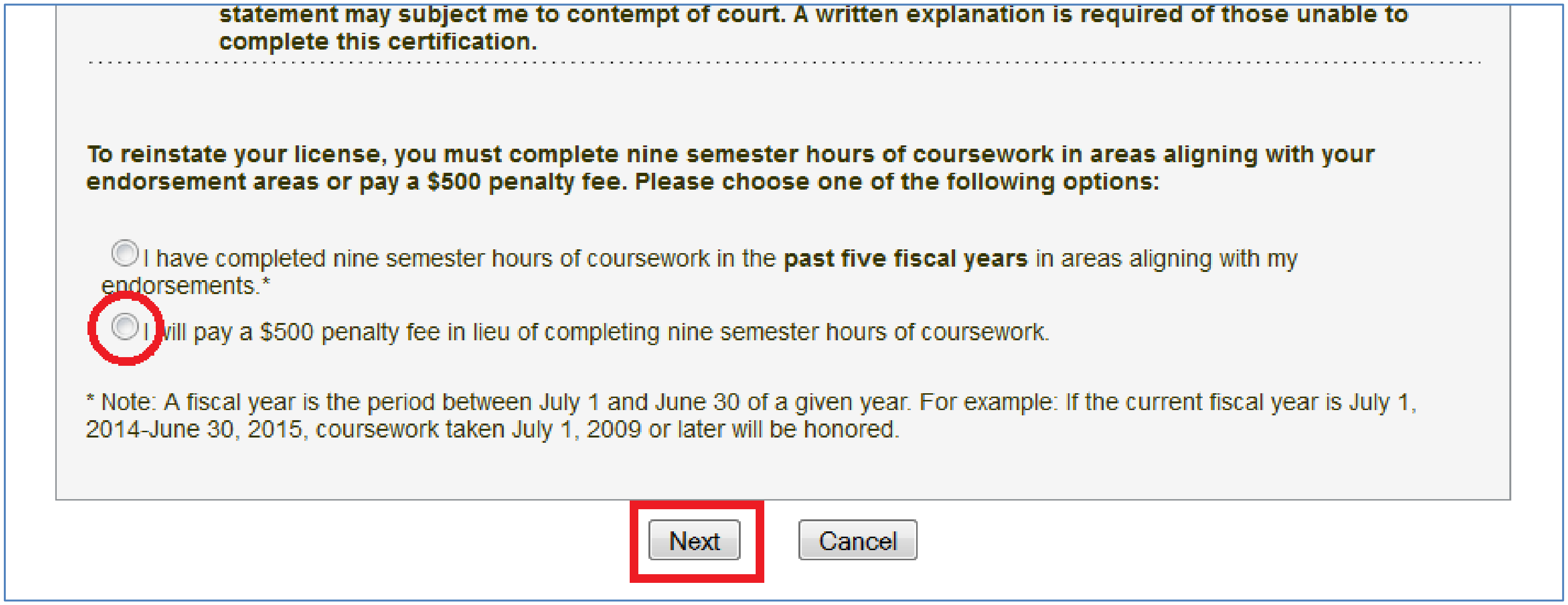
Before your license reaches its expiration date, you must renew your license by verifying professional development requirements have been met. Completing the following steps will renew and register your license for another cycle. Registration fees are $10 per year and will be collected for the license's validity period at the end of the renewal and registration process.

Please answer the following required questions of the Criminal History Disclosure Statement.

Yes	No	Question
○	○	Have you ever had a certificate denied, suspended, or revoked in Illinois or any other state?
○	○	Have you ever been convicted of a felony, or any sex, narcotics, or drug offense in Illinois or any other state?
○	○	Have you failed to file a tax return with the Illinois Department of Revenue, or failed to pay any tax, penalty, or interest owed or any final assessment of same for any tax as required by law and administered by that Department that was not subsequently resolved to the Department's satisfaction?
○	○	Have you ever been indicated as a perpetrator of child abuse or neglect by a state agency responsible for child welfare? (Note: You must answer "Yes" to this question even if the report was removed from the State Central register due to expiration of the retention period, but you may answer "No" to this question if the finding was reversed on appeal.)
○	○	Are you in default on an Illinois student loan for which you have failed to establish a satisfactory repayment plan with the Illinois Student Assistance Commission?
○	○	**I certify under penalty of loss of my right to teach or work in the schools of Illinois that the answers to the questions are true and correct in every respect.**
○	○	**I certify, under penalty of perjury; that I do not have a child support order, and/or that I am not more than 30 days delinquent in complying with a child support order. I understand that I must sign this statement, whether or not I have children, and failure to certify may result in disciplinary action, and making a false statement may subject me to contempt of court. A written explanation is required of those unable to complete this certification.**

Click on the circle next to the second option to reinstate a license immediately by paying $500 plus all back and current registration fees.

Click Next.



statement may subject me to contempt of court. A written explanation is required of those unable to complete this certification.

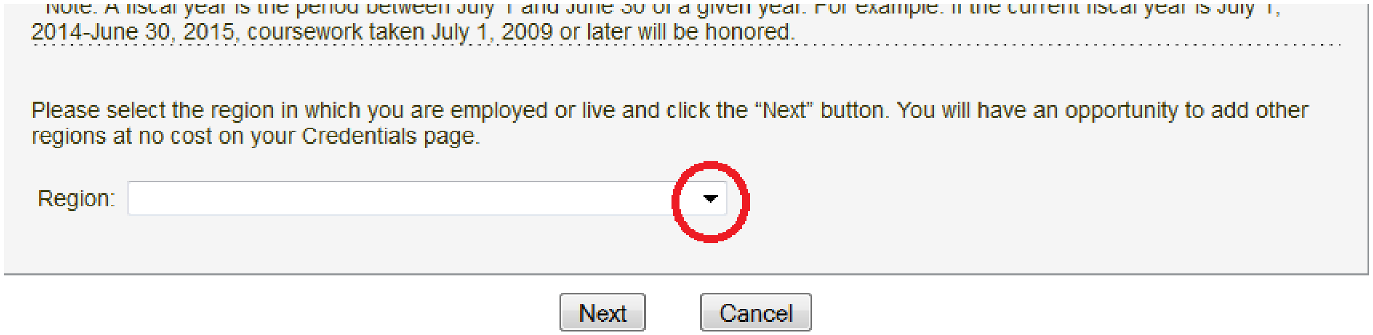
To reinstate your license, you must complete nine semester hours of coursework in areas aligning with your endorsement areas or pay a $500 penalty fee. Please choose one of the following options:

○ I have completed nine semester hours of coursework in the **past five fiscal years** in areas aligning with my endorsements.*

○ I will pay a $500 penalty fee in lieu of completing nine semester hours of coursework.

* Note: A fiscal year is the period between July 1 and June 30 of a given year. For example: If the current fiscal year is July 1, 2014-June 30, 2015, coursework taken July 1, 2009 or later will be honored.

Select the region in which you are employed by clicking the down arrow to reveal the list of regions.

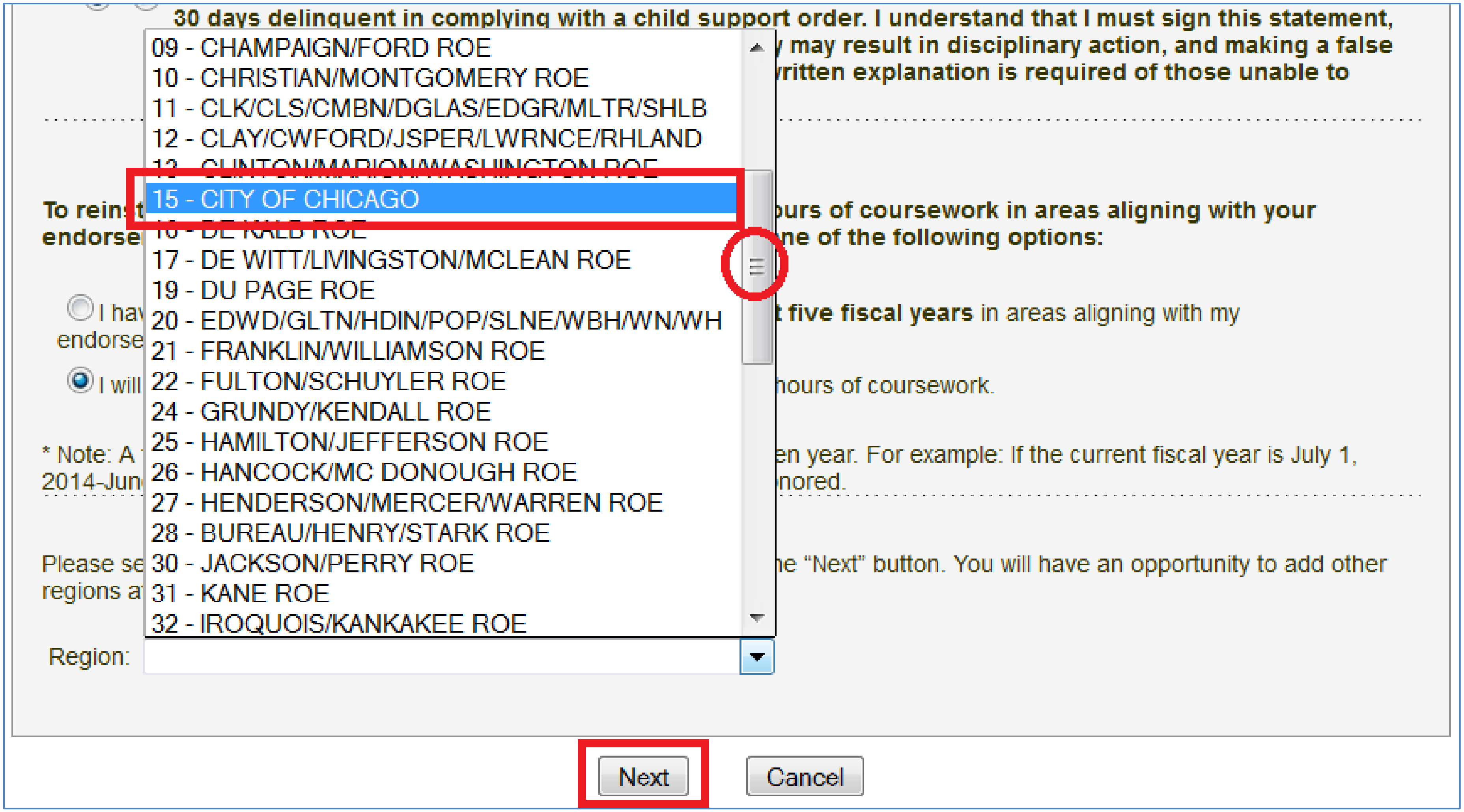


Note: A fiscal year is the period between July 1 and June 30 of a given year. For example: If the current fiscal year is July 1, 2014-June 30, 2015, coursework taken July 1, 2009 or later will be honored.

Please select the region in which you are employed or live and click the “Next” button. You will have an opportunity to add other regions at no cost on your Credentials page.

Region:

Use the scroll bar - ≡ - to move up and down the list. Locate your region and click on it. Click Next .



30 days delinquent in complying with a child support order. I understand that I must sign this statement,
y may result in disciplinary action, and making a false
ritten explanation is required of those unable to

09 - CHAMPAIGN/FORD ROE
10 - CHRISTIAN/MONTGOMERY ROE
11 - CLK/CLS/CMBN/DGLAS/EDGR/MLTR/SHLB
12 - CLAY/CWFORD/JSPER/LWRNCE/RHLAND
13 - CLINTON/MARION/WASHINGTON ROE
15 - CITY OF CHICAGO
16 - DE KALB ROE
17 - DE WITT/LIVINGSTON/MCLEAN ROE
19 - DU PAGE ROE
20 - EDWD/GLTN/HDIN/POP/SLNE/WBH/WN/WH
21 - FRANKLIN/WILLIAMSON ROE
22 - FULTON/SCHUYLER ROE
24 - GRUNDY/KENDALL ROE
25 - HAMILTON/JEFFERSON ROE
26 - HANCOCK/MC DONOUGH ROE
27 - HENDERSON/MERCER/WARREN ROE
28 - BUREAU/HENRY/STARK ROE
30 - JACKSON/PERRY ROE
31 - KANE ROE
32 - IROQUOIS/KANKAKEE ROE

To reins **urs of coursework in areas aligning with your**
endorse **ne of the following options:**

○ I hav **t five fiscal years** in areas aligning with my
endorse

● I will hours of coursework.

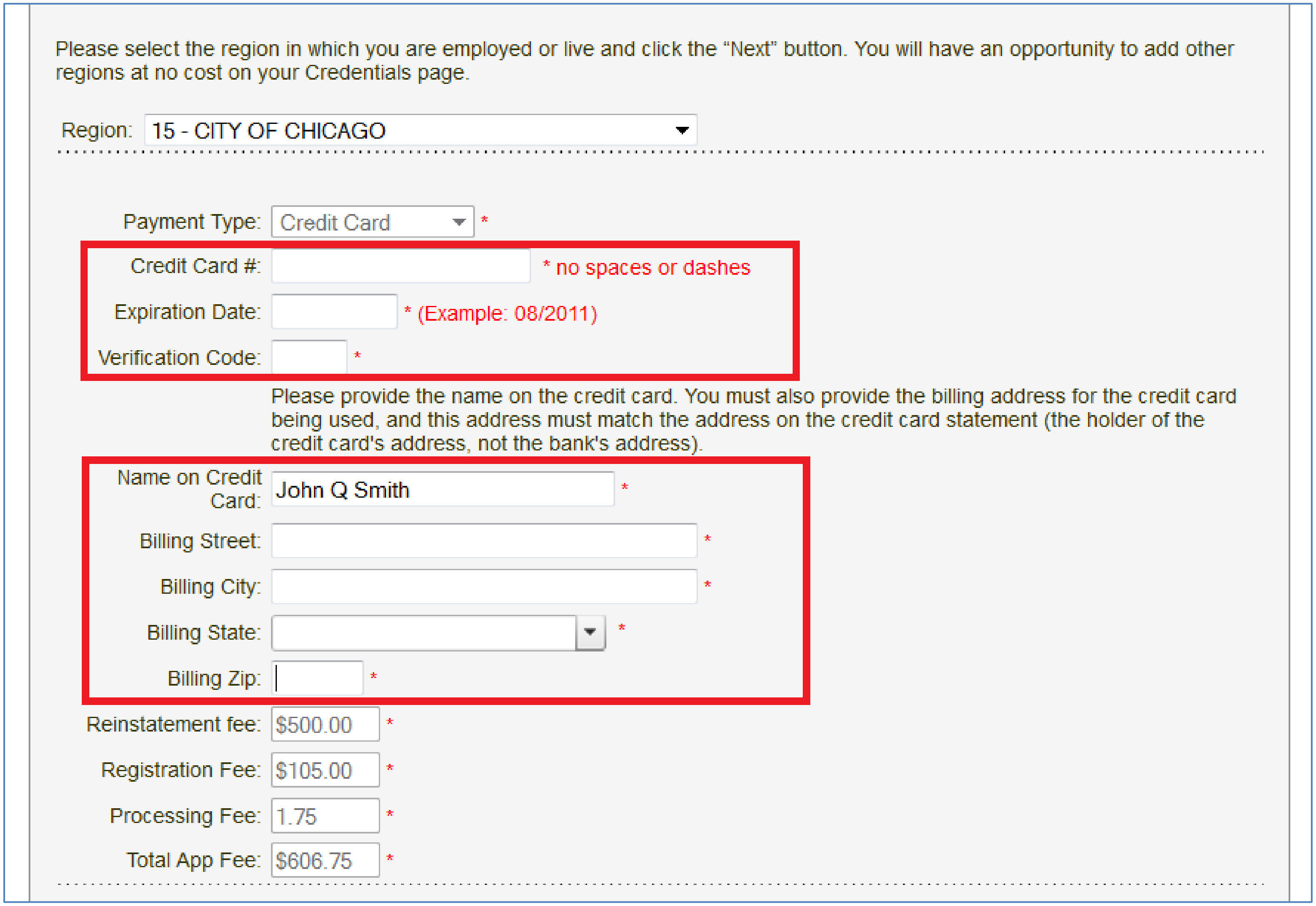
* Note: A en year. For example: If the current fiscal year is July 1,
2014-Jun nored.

Please se ne "Next" button. You will have an opportunity to add other
regions a

Region:

Enter the credit/debit card information.

Note: Do not change the billing name even if using someone else’s card.



Please select the region in which you are employed or live and click the “Next” button. You will have an opportunity to add other regions at no cost on your Credentials page.

Region: 15 - CITY OF CHICAGO

Payment Type: Credit Card *

Credit Card #: * no spaces or dashes

Expiration Date: * (Example: 08/2011)

Verification Code: *

Please provide the name on the credit card. You must also provide the billing address for the credit card being used, and this address must match the address on the credit card statement (the holder of the credit card's address, not the bank's address).

Name on Credit Card: John Q Smith *

Billing Street: *

Billing City: *

Billing State: *

Billing Zip: *

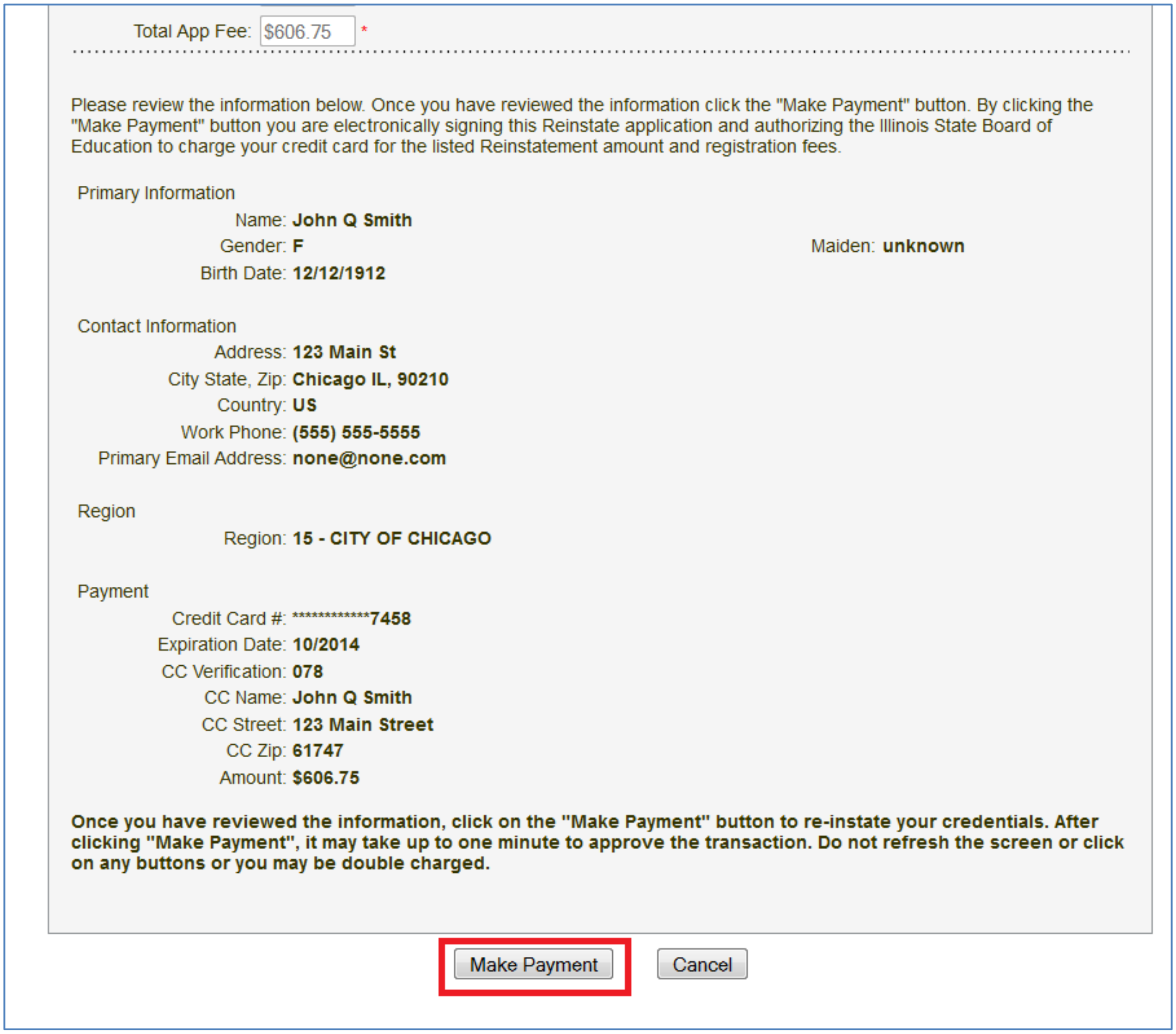
Reinstatement fee: $500.00 *

Registration Fee: $105.00 *

Processing Fee: 1.75 *

Total App Fee: $606.75 *

Review the information. Click Make Payment.



Total App Fee: $606.75 *

Please review the information below. Once you have reviewed the information click the "Make Payment" button. By clicking the "Make Payment" button you are electronically signing this Reinstate application and authorizing the Illinois State Board of Education to charge your credit card for the listed Reinstatement amount and registration fees.

Primary Information
Name: **John Q Smith**
Gender: **F**
Maiden: **unknown**
Birth Date: **12/12/1912**

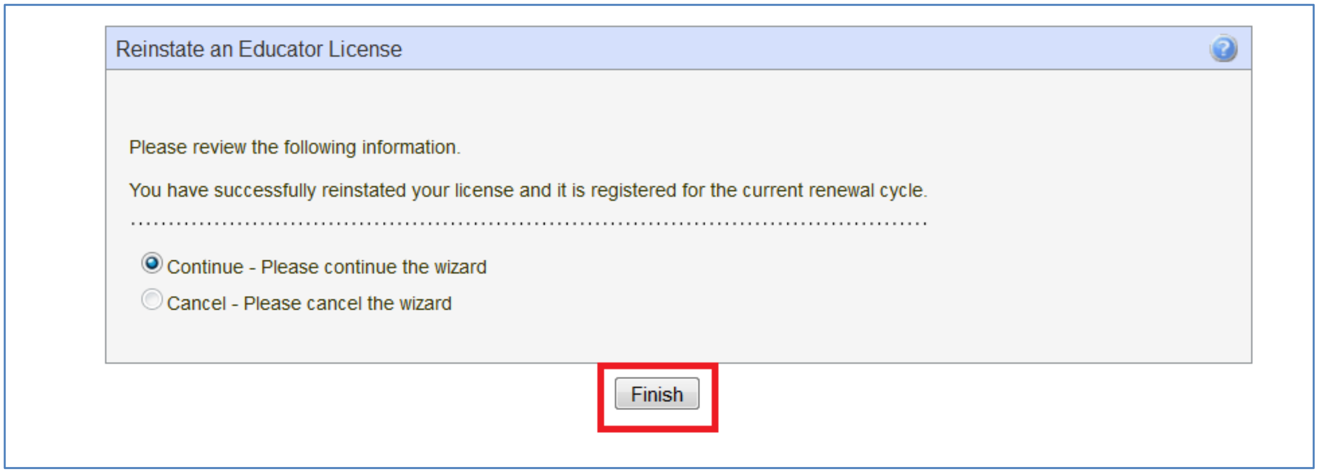
Contact Information
Address: **123 Main St**
City State, Zip: **Chicago IL, 90210**
Country: **US**
Work Phone: **(555) 555-5555**
Primary Email Address: **none@none.com**

Region
Region: **15 - CITY OF CHICAGO**

Payment
Credit Card #: **************7458**
Expiration Date: **10/2014**
CC Verification: **078**
CC Name: **John Q Smith**
CC Street: **123 Main Street**
CC Zip: **61747**
Amount: **$606.75**

Once you have reviewed the information, click on the "Make Payment" button to re-instate your credentials. After clicking "Make Payment", it may take up to one minute to approve the transaction. Do not refresh the screen or click on any buttons or you may be double charged.

ELIS displays the message below. Click Finish.



Reinstate an Educator License

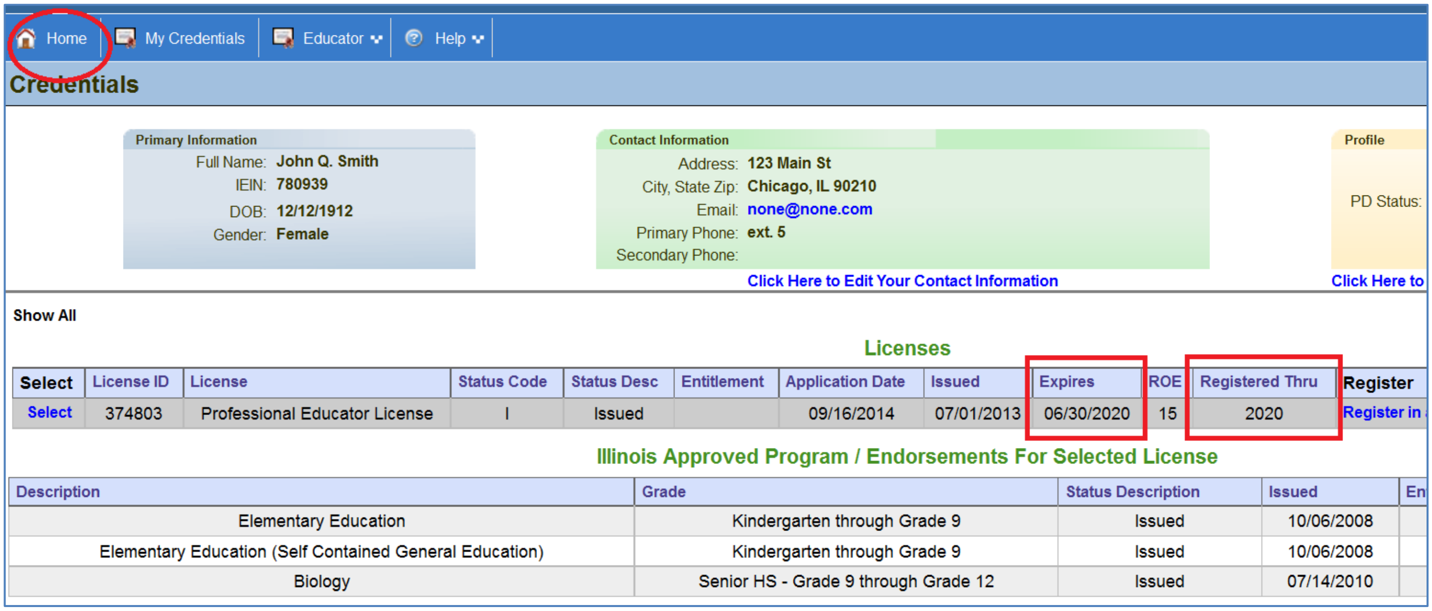
Please review the following information.

You have successfully reinstated your license and it is registered for the current renewal cycle.

● Continue - Please continue the wizard
○ Cancel - Please cancel the wizard

ELIS redirects the user to the Credentials screen. The screen reflects the new expiration and registered through dates.

To return to the dashboard (homepage), click on Home near the top left of the screen.



Primary Information

Full Name: **John Q. Smith**
IEIN: **780939**
DOB: **12/12/1912**
Gender: **Female**

Contact Information

Address: **123 Main St**
City, State Zip: **Chicago, IL 90210**
Email: **none@none.com**
Primary Phone: **ext. 5**
Secondary Phone:

Click Here to Edit Your Contact Information

Profile

PD Status:

Click Here to

Show All

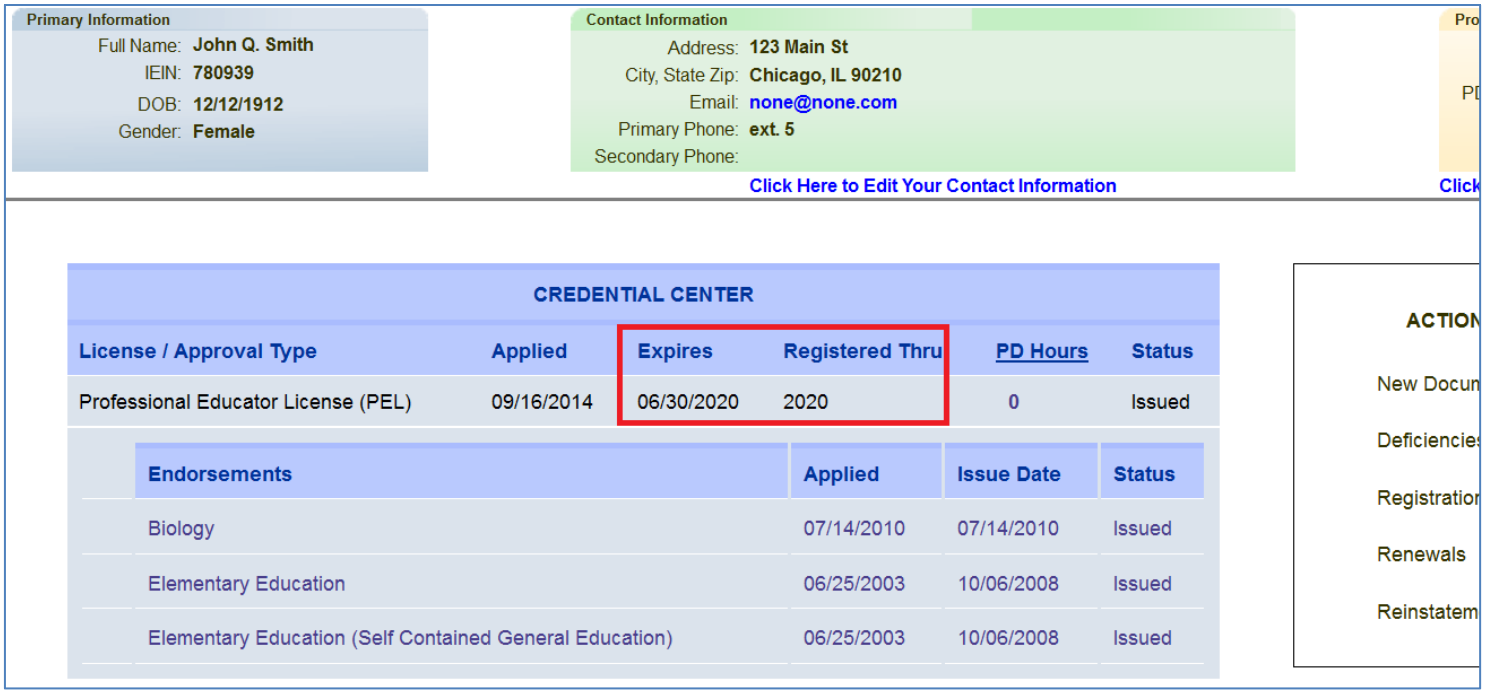
Licenses

Select	License ID	License	Status Code	Status Desc	Entitlement	Application Date	Issued	Expires	ROE	Registered Thru	Register
Select	374803	Professional Educator License	I	Issued		09/16/2014	07/01/2013	06/30/2020	15	2020	Register in

Illinois Approved Program / Endorsements For Selected License

Description	Grade	Status Description	Issued	En
Elementary Education	Kindergarten through Grade 9	Issued	10/06/2008	
Elementary Education (Self Contained General Education)	Kindergarten through Grade 9	Issued	10/06/2008	
Biology	Senior HS - Grade 9 through Grade 12	Issued	07/14/2010	

The dashboard (homepage) also reflects the new expiration and registered through dates.



Primary Information

Full Name: **John Q. Smith**
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DOB: **12/12/1912**
Gender: **Female**

Contact Information

Address: **123 Main St**
City, State Zip: **Chicago, IL 90210**
Email: **none@none.com**
Primary Phone: **ext. 5**
Secondary Phone:

Click Here to Edit Your Contact Information

Pro

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Click

CREDENTIAL CENTER

License / Approval Type	Applied	Expires	Registered Thru	PD Hours	Status
Professional Educator License (PEL)	09/16/2014	06/30/2020	2020	0	Issued

Endorsements	Applied	Issue Date	Status
Biology	07/14/2010	07/14/2010	Issued
Elementary Education	06/25/2003	10/06/2008	Issued
Elementary Education (Self Contained General Education)	06/25/2003	10/06/2008	Issued

NOTE: ISBE does not issue paper licenses. If a paper credential is needed educators may print a copy of their homepage or their credentials page.