

# SUBSEQUENT ENDORSEMENT REQUEST FORM



Educator  
Preparation

Please print legibly

Name (First, Middle, Last): \_\_\_\_\_

Address, City, Zip: \_\_\_\_\_

E-number: \_\_\_\_\_ IEIN: \_\_\_\_\_

Semester and Year of Graduation or Program Completion: \_\_\_\_\_

EIU email: \_\_\_\_\_ Personal email: \_\_\_\_\_

Endorsement(s) completing: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\*To be eligible for an additional endorsement you must complete the required number of hours (including specific courses in some cases) and pass content area test(s) in that area, if required. Information on qualifying for additional endorsements is available at [www.isbe.net/Pages/Subsequent-Teaching-Endorsements.aspx](http://www.isbe.net/Pages/Subsequent-Teaching-Endorsements.aspx).

## For COE Office Only

### Processing:

Application received: \_\_\_\_\_

Pre-completion posted: \_\_\_\_\_

Marked complete: \_\_\_\_\_

Candidate notified: \_\_\_\_\_

Completion date: \_\_\_\_\_

### Verification:

Content test: \_\_\_\_\_ Date: \_\_\_\_\_

Content test: \_\_\_\_\_ Date: \_\_\_\_\_

Content test: \_\_\_\_\_ Date: \_\_\_\_\_

Content test: \_\_\_\_\_ Date: \_\_\_\_\_

Content test: \_\_\_\_\_ Date: \_\_\_\_\_