VDOE

Office of Catholic Schools

Additional Endorsement

Check List

|  |  |
| --- | --- |
| Teacher’s Name: |  |
| Teacher’s School Email: |  |

**ADDITIONAL ENDORSEMENT REQUIREMENTS:**

**\*Each Endorsement has different requirements. You must contact Rosemarie Burrill for specific requirements.**

1. Check which type of Endorsement you are requesting:
2. Virginia Approved Teacher Preparation Program:
3. Reciprocity:
4. Testing:
5. Course by Course Transcript Review:

|  |  |
| --- | --- |
| Principal Signature: | Teacher Signature: |
| Date: | Date: |

**\*\*Include this checklist with your final license packet and mail to:**

**Office of Catholic Schools**

**Rosemarie Burrill**

**7800 Carousel Lane Richmond, VA 23294**