

# LICENSE UPDATE

Type or print the following information.

(See instructions on reverse side.)

|                          |                                   |   |        |          |
|--------------------------|-----------------------------------|---|--------|----------|
| last name                | first name                        | middle name                             | maiden |          |
| street address           |                                   | city                                    | state  | zip code |
| social security number * | telephone number (with area code) | LEA and unit number (if employed in NC) |        |          |

\* See instructions

## Check the action you are requesting

|   |   |
|---|---|
| <input type="checkbox"/> change name<br>_____<br>name as it now appears on the license                  | <input type="checkbox"/> delete an area of licensure<br>_____<br>area to be deleted (name and code) |
| <input type="checkbox"/> change social security number<br>_____<br>SSN as it now appears on the license | <input type="checkbox"/> renew license  |
| <input type="checkbox"/> clear a provisional area<br>_____<br>area to be cleared                        | <input type="checkbox"/> validate an expired license<br>_____<br>school year                        |
| <input type="checkbox"/> other _____<br>_____   |   |

|                                     |               |
|-------------------------------------|---------------|
| _____<br>Superintendent or Designee | _____<br>Date |
| _____<br>email address              |               |

## STATEMENT OF APPLICANT

Have you ever had a certificate or license revoked or suspended by any state or other governing body? If yes, attach a statement giving full details and official documentation of the action taken.  yes  no

Have you ever been convicted of a crime (excluding minor traffic violations)? If yes, you must submit court documents that indicate judgment and disposition of the case from the court of conviction and an explanation of the incident(s).  yes  no

**I certify that the information provided in this application is correct and true. I understand that the falsification of any statement or document will result in the revocation of my North Carolina license.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Email Address \_\_\_\_\_

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# Form U: Instructions

**This License Update should be submitted for the following actions:**

- change in social security number
- clearance of a provisional area added by a Licensure Section evaluation
- deletion of an area of licensure
- name change
- renewal of a license
- validation of an expired license (**Validations can be requested only by an employing school system, not by individuals.**)
- Other

**Follow these instructions for completing this form:**

- Fill in current personal information (please print or type). SSN is required. It is your license number. **\*You are not required by law to disclose your social security number (SSN). However, your SSN is required by the North Carolina Department of Public Instruction (NCDPI) for purposes of issuing a NC teaching license. The NCDPI will not grant a teaching license without a valid SSN.**
- Identify the North Carolina school system that employs the applicant (if applicable).
- If not employed, signature of the superintendent or designee is not needed.
- Check the block that corresponds to the desired action, and fill in the requested information.
- Answer the questions under Statement of Applicant only for license renewals and requests for validation (requests for validation must come from employing school systems).
- Sign and date the application. [All requests from school systems must be signed and dated by the superintendent or designee. Requests from individuals must be signed and dated by the applicant under Statement of Applicant.]
- Include Email Address

**Collect the necessary supporting materials for the request:**

- **change in social security number:** Form U. No documentation or fee is required if an error was made by the Licensure Section or if the applicant is employed in a North Carolina school system. If the error is the applicant's and the applicant is not employed by a North Carolina school system, a processing fee (\$30) and a copy of the social security card must be submitted.
- **clearance of a provisional area added by a Licensure Section evaluation:** Form U, original transcripts or documentation of credits earned, and Praxis scores (if a test or subject assessment was required). **Note: Grade reports are not accepted in place of transcripts.**
- **deletion of an area of licensure:** Form U.
- **name change:** Form U, copy of court order if name was changed by legal action. No official documentation is required if a name change results from marriage. No fee is charged if the request comes from an employing school system. Requests from individuals require a \$30 fee. **Do not request a name change unless the change results from marriage or legal action.**
- **renewal of a license:** Form U, transcripts or certificates of credit, and processing fee (\$55). **Note: Grade reports are not accepted in place of transcripts.**
- **validation of an expired license:** Form U, Form N, processing fee (\$55).

Mail the completed License Update, supporting materials, and one \$55 fee to

East Carolina University, Teacher Education, Speight 105, Greenville, NC 27858

You may pay by personal check, money order, or certified check (made payable to the Department of Public Instruction), Visa or MasterCard. If you wish to pay by credit card, fill out the credit card payment form <http://www.ncpublicschools.org/docs/licensure/ccform.pdf> and include with forms.

*Please do not fold down the corners of pages or use staples or paper clips to secure the application materials. Doing so will slow down the automated application process and delay your response. Mail the unfolded materials in a 9" x 12" envelope. Thank you.*