



OFFICE OF SUPERINTENDENT OF PUBLIC INSTRUCTION  
 Professional Education and Certification  
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## PREREQUISITE EXPERIENCE FOR A PRINCIPAL'S CERTIFICATE

INSTRUCTIONS TO THE APPLICANT: Candidates applying for a residency principal's certificate must, as a condition for the issuance of such certificate, document successful school-based experience in an instructional setting.

### SECTION I TO BE COMPLETED BY ALL APPLICANTS FOR A RESIDENCY PRINCIPAL CERTIFICATE:

1. NAME	LAST	FIRST	MIDDLE	MAIDEN/FORMER NAME
2. ADDRESS				3. DATE OF BIRTH
CITY/STATE/ZIP				4. SOCIAL SECURITY NO. (OPTIONAL)
5. TELEPHONE: BUSINESS (            )				6. E-MAIL
				HOME (            )

Based on personnel records, this statement **MUST** be prepared and signed by the superintendent or the personnel director of the school district or private school. Stamped signatures **MUST** be initialed by the individual using the stamp. Please return the completed form directly to the applicant.

### SECTION II

TO BE COMPLETED BY EMPLOYER, OR HIS/HER DESIGNEE, WHERE APPLICANT WAS EMPLOYED IN AN INSTRUCTIONAL SETTING		
SCHOOL DISTRICT	FROM	TO
ADDRESS	PRINTED NAME	
CITY/STATE/ZIP	TITLE	
SIGNATURE	DATE	TELEPHONE (            )

### RETURN COMPLETED FORM TO APPLICANT

**APPLICANT: INCLUDE THIS COMPLETED FORM WITH YOUR OTHER APPLICATION FORMS. RETURN ALL APPLICATION FORMS TO THE COLLEGE/UNIVERSITY WHERE YOU ARE COMPLETING YOUR ADMINISTRATIVE PROGRAM.**