

Southern Union Office Education Application for Renewal or Reinstatement of Certification

Complete this form and mail or email to the address listed at the bottom of the form.

If you have completed any academic courses since your last renewal, please request an official transcript to be mailed or emailed to the transcript address at the bottom of the form. Certificate type(s) for which I am renewing/reinstating: A. Basic ____C. Professional/Administrator ____E. Conditional _____D. Designated Subjects/Service B. Standard ____F. Unknown Print Legal Name:___ First Middle Maiden Last City: ST. Zip: Phone Number:______NAD Teacher ID #_____ Check if new address Birthdate: Email: **CERTIFICATION INFORMATION:** What denominational teaching certificate do you now hold? Date Issued:_____Union Name:____ If now teaching, at what school?______Conference:____ This application indicates that I am an active member of the Seventh-day Adventist Church and certify that it is my intention to subscribe to and teach within the framework and philosophy of the Seventh-day Adventist Church as outlined in the General Conference Working Policy and the employment policies of the Southern Union Conference EducationCode. Signature: Email form to: Mail form and official transcripts Bcalderon@southernunion.com to: Office of Education/ Lbiggs@southernunion.com Certification Southern Union Conference **Email for Official Transcripts:** P.O. Box 923868

Renewal or Reinstatement Only

Peachtree Corners, GA 30010-3868

Certification@southernunion.com

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