

# Convert Administrator Exchange to Initial or Professional

For Office Use Only:

Form revised 7/15

Mail to:  
**Board of Educational Examiners**  
Grimes State Office Building  
400 E. 14<sup>th</sup> St.  
Des Moines, Iowa 50319-0147

I have included:

\_\_\_\_\_ \$86 licensure and background fees (payable to the Board of Educational Examiners – check or money order only)

\_\_\_\_\_ Official transcripts showing that all the required coursework has been completed.  
Transcripts should be issued to you and submitted with this application.

\_\_\_\_\_ Verification of administrative experience acquired during the term of the Exchange or Initial  
(see attached forms).

LATE RENEWAL FEE. An additional fee of \$25 per calendar month, not to exceed \$150, shall be imposed if an application is submitted after the license expiration date. The board will waive the late fee for the following: (a) not currently practicing as an educator in Iowa, (b) obtaining a Substitute License.

**All fees are NONREFUNDABLE. Incomplete applications will be voided after 45 days.** Please allow four weeks for processing.

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Applicant's Folder #	Social Security #	Date of Birth Month    Day    Year	<input type="checkbox"/> Male <input type="checkbox"/> Female
Last Name  <i>Name changes require a photocopy of official legal documentation.</i>	First Name	Middle Name	Maiden Name
Address	City	State	Zip Code
Evening Phone  (    )	Daytime Phone  (    )	Email Address	

**STATEMENT OF FRAUD;** Fraud in procurement of a license or falsifying records for licensure purposes will constitute grounds for filing a complaint with the Iowa Board of Educational Examiners.

- a. Yes  No  PR  Have you ever been convicted of a felony?
- b. Yes  No  PR  Have you ever been convicted of a crime other than parking or speeding violations?
- c. Yes  No  Do you currently have any criminal charges pending against you?
- d. Yes  No  PR  Have you ever had a founded report of abuse made against you?
- e. Yes  No  PR  Have you ever had an educational license denied, revoked, or suspended?

For any "Yes" response attach a written explanation on 8 1/2 x 11" paper. Be sure to include the date of the violation. DO NOT explain on this application form. \*If you have reported a "Yes" response on a previous application, check PR (previously reported) instead of "Yes" on this application if no further conviction(s) has occurred.

I certify under penalty of perjury and pursuant to the laws of the state of Iowa that the preceding information is true and correct.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



**SECTION III: To be completed by Administrator.**

\_\_\_\_\_ Administrator has completed two years of administrative experience in a non-public setting or an out-of-state educational setting during the term of an administrative license.

Administrative Experience From (month) \_\_\_\_\_ 20\_\_\_\_ Until (month) \_\_\_\_\_ 20\_\_\_\_

_____	# _____	_____
Administrator's Signature	Administrator's	Folder Number
_____	_____	_____
Type or print name of administrator	Position	School District

**NOTE:** Photocopies or copies by fax of any application form or experience verification form will not be accepted. Original signatures are needed.

**NOTE TO ADMINISTRATOR:** If in your judgment you are convinced that the applicant above should not be given licensure, at least until further investigation is made, do not sign this form and please write a CONFIDENTIAL LETTER to the above address stating your reasons.