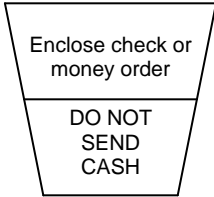


Checklist

Before you mail this application, be certain that you have completed the following:

- _____ I have enclosed official transcripts showing the completion to this point of all course work in my School Psychology program. If my transcripts are being sent separately, I have included a note to that effect.
- _____ I have had section II signed by the recommending official at the institution at which I am completing my program.
- _____ I have been fingerprinted and am sending along (or have already sent) the fingerprint card and waiver form that I received from the Iowa Board of Educational Examiners. (If you need a card, go to www.boee.iowa.gov or call (515)281-3245 to leave your name and address to request a fingerprint packet. Even if you have been fingerprinted to obtain a license in another state, you must be fingerprinted again in order to obtain an Iowa license.)
- _____ I have completed and signed the section titled "Background Information."
- _____ If I answered "Yes" to any question under "Background Information," I have attached a written explanation on 8 1/2 x 11" paper.
- _____ I have enclosed \$145 to cover both the evaluation fee and licensure fee.
- _____ I have enclosed \$65 to cover the cost of my background check. (You may send a single check or money order for \$210).
- _____ I am mailing the entire packet to:

State of Iowa
Board of Educational Examiners
Licensure
Grimes State Office Building
400 E. 14th St.
Des Moines, Iowa 50319-0147



APPLICATION FOR CLASS A LICENSE - SCHOOL PSYCHOLOGY

State of Iowa
Board of Educational Examiners
Licensure
Grimes State Office Building
400 E. 14th St.
Des Moines, Iowa 50319-0147

**For applicants who have completed all requirements
except the internship or thesis.**

Revised 04/11

INSTRUCTIONS:

1. Complete Section I.
 2. Enclose a \$145.00 nonrefundable check or money order made payable to the Board of Educational Examiners. This fee consists of a \$60.00 evaluation fee and a \$85.00 licensure fee.
 3. Attach official college/university transcripts of credit for the baccalaureate and master's degree programs.
 4. Complete Section II.
 5. Complete fingerprint packet information. Enclose the \$65 fee.
 6. Send all materials to the address that appears in the upper right hand corner of this page.
 7. Please allow four weeks for processing.
- Name changes require a photocopy of official legal documentation. **ALL FEES ARE NONREFUNDABLE. Incomplete applications will be void after 30 days.**

Section I: TO BE COMPLETED BY APPLICANT

Applicant's Folder # (To Be Assigned by BoEE Office)	Social Security #	Date of Birth Month Day Year	<input type="checkbox"/> Male <input type="checkbox"/> Female
Last Name	First Name	Middle Name	Maiden Name
Address	City	State	Zip Code
Evening Phone ()	Daytime Phone ()	Email Address	

Background Information:

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.

- 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?
(NOTE: Include all deferred judgments)
- 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?

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.

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

I hereby give permission for the Board of Educational Examiners to conduct both an Iowa criminal history record check with the Division of Criminal Investigation and a national check through the Federal Bureau of Investigation. Any information maintained by the DCI or the FBI may be released as allowed by law.

Signature of Applicant

Date

Section II: TO BE COMPLETED BY INSTITUTION

A nonrenewable Class A license valid for one year may be issued to an individual who must complete an internship or thesis as an aspect of an approved program in preparation for the school psychologist endorsement. The one-year Class A license may be issued under the following limited conditions:

1. Verification from the institution that the internship or thesis is a requirement for successful completion of the program.
2. Verification that the employment situation will be satisfactory for the internship experience.
3. Verification from the institution of the length of the approved and planned internship will meet institutional requirements, or the anticipated completion of the thesis will be within one year of issuance of this license.
4. Verification of the evaluation processes for successful completion of the internship or thesis.
5. Verification that the internship or thesis is the only requirement remaining for successful completion of the approved program.

We verify that the applicant is enrolled in our NASP or APA approved School Psychology program, and that the above statements are true.

COLLEGE
SEAL

Signature of Recommending Official

Name of Institution

Typed Signature of Recommending Official and Phone Number