



# Application for a Class B Administrator (Conditional) License

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

*Revised 5/11*

**INSTRUCTIONS:**

- NO GRADE REPORTS OR COPIES ACCEPTED.** The addition of endorsements to an Iowa Professional Administrator License is based on completion of college or university based credit. Competency or assessment based programs will not be accepted. All programs of study must be based on college or university credit.
1. Attach a program of study from the college or university in which you are completing your program.
  2. A complete application must include the completed application, official transcripts, and fee.
  3. Send all materials and check or money order for \$85 (made payable to Board of Educational Examiners) to:  
**State of Iowa, Board of Educational Examiners Licensure, Grimes State Office Building, 400 E. 14<sup>th</sup> St., Des Moines, Iowa 50319-0147.**
  4. Please allow 6 to 8 weeks to process. Name changes require a photocopy of official legal documentation. **ALL FEES ARE NONREFUNDABLE**
  5. A late fee of \$25 per month, not to exceed \$150 will be assessed from the date of hire for all individuals administering in a content area without proper licensure and must be paid prior to the issuance of any license.
  6. **All fees are NONREFUNDABLE. Incomplete applications will be voided after 45 days.**

\*Note: If you have been recommended for licensure from an Iowa Institution, you will need to request your transcripts be sent to the BOEE

Applicant's Folder #	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	

**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? (Include any OWIs.)
- 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 II - TO BE COMPLETED BY AN ADMINISTRATOR** (type or print)

If a person is the holder of a valid Iowa teaching license and is seeking to obtain a new endorsement, a class B (conditional) license may be issued if requested by an employer and if the individual seeking this endorsement has completed at least seventy-five percent (75%) of the requirements leading to completion of all requirements for that endorsement. **The applicant is expected to complete all requirements for this endorsement within the term of this license. Upon completion of the requirements, the applicant must complete application materials, and be recommended by the recommending official of the institution at which the requirements have been completed. NOTE: The Class B (Conditional) license is valid only if you maintain your Professional Administrator License!**

The \_\_\_\_\_ school system requests that

\_\_\_\_\_ be issued a Class B (*conditional*) license to serve as  
(name of applicant)

Administration

- Principal K-8
- Principal 7-12
- Principal PK-12/Special Education Supervisor
- Superintendent

Other (please specify subject and grade level): \_\_\_\_\_

This request is for period beginning with the following school year- 20\_\_\_\_ - 20\_\_\_\_

\_\_\_\_\_  
(Administrator's Signature)

\_\_\_\_\_  
(Print or type administrator's name)

\_\_\_\_\_  
(date)

\_\_\_\_\_  
(Applicant's Signature)

\_\_\_\_\_  
(date)