

MACS RELICENSURE COMMITTEE

RELICENSURE SUBMISSION COVER SHEET

RELICENSURE APPLICANT INFORMATION			
SCHOOL NAME:			
APPLICANT NAME:			
APPLICANT EMAIL:			
HOME ADDRESS:			HOME PHONE #:
STREET/CITY/STATE/ZIP			WORK PHONE #:
FILE FOLDER #:	EXPIRATION DATE:	GRADE(S) / SUBJECT(S):	LICENSE AREA(S):
RELICENSURE SUBMISSION CHECKLIST			
☐ I HAVE SUBMITTED HOURS TOWARDS THIS RENEWAL IN A PREVIOUS YEAR			
Directions : Verify that you have included the following items by checking each box below and sign.			
Note : Submission materials should be organized in the order outlined in this checklist. Clock hour documentation should be organized according to the order in which it is recorded on the Master Record Form.			
$\ \square$ Relicensure Submission Cover Sheet (with completed checklist)			
☐ Copy of Current License			
☐ License History			
☐ Documentation of Hours Approved by Outside Committee (if relevant)			
☐ Master Record Form			
\square Certificate or Other Accepted Documentation for Each Clock Hour Activity			
"I verify that I have reviewed the materials listed above for accuracy and completeness. I understand that MN Association of Charter Schools encourages applicants to have materials reviewed by the School Relicensure Representative before submission (see below)."			
SIGNATURE:			
Note: If completing this form electronically, please enter your full legal name.			
FOR COLLOCAL RELICENCIANE REPRESENTATIVE			
FOR SCHOOL RELICENSURE REPRESENTATIVE			
The MACS Relicensure Committee highly recommends that your School Relicensure Representative signs this			
form to verify that all necessary documents are included and have been completed correctly.			
"I certify that I have reviewed this submission and that all necessary documents are included, completed correctly, and organized in the			
appropriate order."			
PRINT NAME:			Minnesota Association of Charter Schools
CICNIATURE			ATTN: Relicensure Committee 161 St. Anthony Ave., Suite 1000, St. Paul, MN 55103
SIGNATURE: No.	te: If completing this form ele	ctronically, please enter your full legal name.	P: 651-789-3090 F: 651-789-3093

relicensure@mncharterschools.org