



License Renewal Worksheet

Teacher Name _____

Birthdate _____ Account ID: _____

(Number printed on the back of your license.)

Date of Employment in Stanfield _____

(August of the year you started in Stanfield.)

Number of CPDUs required for renewal _____

Number of CPDUs verified by supervisor _____

Credits required for renewal _____

Teacher Signature

Date

Supervisor Signature

Date

Date received at DO _____ Date submitted to TSPC _____

By _____