

**LICENSURE RENEWAL**

**Return this form with completed application.**

Print name of LPDC Barberton City School District

Printed name of applicant \_\_\_\_\_

Enter issue date from license to be renewed. <span style="float: right;">.....&gt;</span> The issue date is located in the upper right hand corner of the certificate.	____ / ____ / ____
Enter semester hours taken for the renewal of this license <span style="float: right;">.....&gt;</span>	_____
Enter quarter hours taken for the renewal of this license <span style="float: right;">.....&gt;</span>	_____
Enter continuing education units (CEU's) earned <span style="float: right;">.....&gt;</span>	_____

LPDC Barberton City Schools DATE: \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ DATE: \_\_\_\_\_

<b>ACTIVITY</b>	<b>CEU'S</b>	<b>CONTACT HOURS</b>	<b>EXPLANATION</b>