

# APPLICATION FOR A NORTH CAROLINA LICENSE

Type or print the following information.  
(See reverse side for instructions)

last name	first name	middle name	maiden	
street address		city	state	zip code
social security number	date of birth (month, day, year)	telephone number (with area code)		
sex <input type="checkbox"/> male <input type="checkbox"/> female	race <input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Asian <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic <input type="checkbox"/> Other			

List the areas of licensure for which you are applying

\_\_\_\_\_

\_\_\_\_\_

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## STATEMENT OF APPLICANT

Have you ever had a certificate or license revoked or suspended by any state or other governing body? If yes, attach a statement giving full details and official documentation of the action taken.

yes  no

Have you ever been convicted of a crime (excluding minor traffic violations)? If yes, you must submit court documents that indicate judgment and disposition of the case from the court of conviction and an explanation of the incident(s).

yes  no

I certify that the information provided in this application is correct and true. I understand that the falsification of any statement or document will result in the revocation of my North Carolina license.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Form A: Instructions

1. Fill in complete name, beginning with your last (no initials please).
  2. Give complete address, including zip code.
  3. Fill in your telephone number in case the Licensure Section needs to contact you about your application.
  4. Write in your social security number. This number serves as your license number.
  5. Fill in your date of birth (month, day, year).
  6. Check the correct box for sex and race.
  7. Indicate the areas of licensure for which you are applying.
  8. Answer the questions under Statement of Applicant. Your application will not be evaluated without this information. An answer of "yes" does not automatically exclude a person from obtaining a license.
  9. Sign the application. Your signature certifies that the information provided is correct and true. Falsification of any statement or document is grounds for revocation of a license.
  10. Write in the date of your application.
  11. Mail completed document to Wingate University, Thayer School of Education, Campus Box 3065, Wingate, NC 28174, along with a \$55 check made out to NCDPI. Questions may be directed to Cathy Smith at 704-233-8127 or to Dr. Sarah Harrison-Burns, Dean of the Thayer School of Education, at 704-233-8128.
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