

LEVEL 1 LICENSE RENEWAL FORM¹	Mail Form to: USBE - Licensing 250 East 500 South P.O. BOX 144200 Salt Lake City, UT 84114-4200	USBE USE: <input type="checkbox"/> Ethics <input type="checkbox"/> Background Check <input type="checkbox"/> Years of UT Exp. <input type="checkbox"/> Status: A / I
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A Level 1/APT license may be renewed if the individual has **less than 3 years of experience in a Utah public or accredited private school** and has earned **100 points** within this cycle or the most recent 3 years if the cycle has expired. The rules and steps for Utah Educator License Renewal can be found at [Active/Inactive Educator Renewals](#).

License Holder's Name:	CACTUS ID#:
Email:	
License Expiration Date:	Phone number:

I am an: Active UTAH Educator Inactive Educator
(Active/Inactive Educator: [Definitions](#))

Have you ever had a credential revoked or suspended that has not been "reinstated" by the Utah Professional Practices Advisory Commission or by another standards board? Yes No

(Enter Total Renewal Points)

I verify these statements and total renewal points are true and I understand this information may be used or provided to potential employers and to the Utah State Board of Education for appropriate licensure purposes. I understand that my Utah renewal may be rescinded and my license is subject to disciplinary action if any information on this renewal form is false.

License Holder's Signature:	Date:
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Currently Licensed Administrator:

(Enter Total Renewal Points)

I verify by my signature and initials on all subsequent pages that I have reviewed and verified that the total license renewal points listed are valid and appropriate. I verify that I am a licensed education administrator, have knowledge of the Utah Educator License Renewal Rules (R277-500), and that all renewal points listed are in compliance with those rules.

Administrator's Signature _____ **Date**

Printed Name of Administrator _____ **CACTUS ID or State/License number**

Email Address of Administrator _____ **Phone** _____ **District/School**

*Once all pages of this form are **completed**, and have been **reviewed and signed by a licensed K-12 administrator**, make a copy for your records and mail the original form to the above address. Do not send supporting documentation.*

¹ This form is also used to renew a Level 1-LEA Specific License and a Level 1-APT License.

