





## ENDORSEMENT REMOVAL APPLICATION

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### VERIFICATION AND SIGNATURE

I AM REQUESTING THE REMOVAL OF THE ENDORSEMENT(S) INDICATED IN SECTION II. ONCE THE ENDORSEMENT(S) IS/ARE REMOVED, I UNDERSTAND THAT I WILL NEED TO MEET THE REGULATIONS IN EFFECT AT ANY FUTURE DATE I WISH TO ADD IT AGAIN. IF REMOVING A SPECIAL EDUCATION ENDORSEMENT, I UNDERSTAND I WILL NO LONGER BE ELIGIBLE TO BE PLACED IN A SPECIAL EDUCATION CLASSROOM.

PLEASE CHECK ONE OF THE FOLLOWING STATEMENTS:

- I AM CURRENTLY NOT UNDER CONTRACT WITH ANY ALASKA SCHOOL DISTRICT.
- I AM CURRENTLY UNDER CONTRACT WITH \_\_\_\_\_ SCHOOL DISTRICT, AND I VERIFY THAT I AM NOT ASSIGNED TO WORK IN AN ALASKA PUBLIC SCHOOL IN THE ENDORSEMENT AREA(S) BEING REMOVED. I HAVE INCLUDED A LETTER FROM THE DISTRICT PERSONNEL OFFICE VERIFYING MY PLACEMENT.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE