State of Washington

PROFESSIONAL EDUCATION PERMIT

Granted in Accordance with Professional Educator Standards Board

NAME

CERTIFICATE TYPE

ENDORSEMENT(S)

EFFECTIVE DATE EXPIRATION DATE

RECOMMENDED BY (College, University, Consortium, ESD, OSPI)

AUTHORIZED SIGNATURE

The holder of this permit is responsible for its registration with his/her employer. THIS PERMIT DOES NOT IN AND OF ITSELF ENTITLE THE HOLDER TO BE OTHERWISE CERTIFICATED.



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