

**VERIFICATION OF ENTRY YEARS ENHANCEMENT
(EYE)
UPGRADE FROM A LEVEL 1 EDUCATOR LICENSE
TO A LEVEL 2 EDUCATOR LICENSE**

Mail to: Amanda Charlesworth Educator Quality Services 250 East 500 South P O Box 144200 Salt Lake City, UT 84114-4200

Current License Expiration Date:	
Applicant's Name:	
Mailing Address:	
Email Address:	
Daytime Phone:	SS# or CACTUS ID#:
License Area of Concentration:	

Please check each of the following that were completed during three of the last five years as a licensed educator:

Worked with a trained mentor for three years.	
Achieved a score of 160 or higher on the Praxis II - Principles of Learning and Teaching Test (#0521, #0522, #0523, or #0524) in the area of educational preparation and assignment	
Completed a portfolio review.	
Successfully satisfied district evaluations for three years of the last five years in license area of concentration.	

The above named teacher holds a Level 1 Educator License and has completed all requirements for the Level 2 License. I recommend him/her for the Level 2 License.

District Superintendent or Human Resource Director

District

Date

- Please submit a check or money order for \$60 (\$109 if your license has expired along with a fingerprint background check) made out to USOE with this recommendation.

3/12/2007