



Teacher Registration Renewal Form

To maintain registration status you must submit the following documentation and the **\$75** renewal fee prior to the expiration date on your current teacher registration [OAR 715-045-0012(8)]. You must notify this agency of any change of address. This will assist us in maintaining up-to-date files and ensure that you receive your reminder notice at the time of your next renewal. When notifying us of any changes, please include your registration number.

Complete the following required fields:

Last Name			First Name		
Home Phone Number	Work Phone Number	Date of Birth		E-Mail Address	
Home Address:					
City /State		Zip:		Social Security # *	
Current School Employed at:					
List All Previous Career School(s) You Taught At Within The Last 3 Years [OAR 715-045-0012(8)(d)]		Course / Program Taught		Include Dates MM/YYYY	

Have you been convicted of a crime other than a minor traffic violation since your last renewal?

Yes No

If answer is "yes," attach explanation on a separate sheet and submit a copy of court records, a letter from the employing school and the applicant's most recent employer, parole officer, or other appropriate professional source [OAR 715-045-0012(13)].

Be advised that if you work at a school that enrolls minors you will be required to have a fingerprint and background check completed. Check with the school you are considering working for to verify if this would be a requirement.

Confirm the following:

- Yes Did you verify that the information located in each sections is accurate and complete?
- Yes Did you include a copy of all CURRENT applicable certificates, license(s), or other credentials legally required for employment in the field you are teaching?
- Yes Does your renewal application have your signature and the signature of the director of the school you are working for, as required [OAR 715-045-0012(2)(c)]?

- Yes For cosmetology teachers, did you provide evidence of completion of 30-clock hours of continuing education [OAR 715-045-0012(8)(b)]?
- Yes Did you provide proof of any name change that occurred since your last registration?

This Renewal Form is for current registrations only; complete a new teacher registration form to add a new field of practice/program/course. Registration forms are available at www.oregon.gov/HigherEd.

- You may pay by check or money order payable to Higher Education Coordinating Commission.

Mail to: Higher Education Coordinating Commission
Office of Private Postsecondary Education
255 Capitol St. NE
Salem, OR 97310

A REGISTRATION CERTIFICATE CANNOT BE ISSUED UNTIL ALL APPLICATION REQUIREMENTS ARE COMPLETE AND ALL FEES HAVE BEEN PAID.

By my signature below I hereby certify that the information submitted on or relating to this form is true and correct and grant the Higher Education Coordinating Commission permission to check civil or criminal records to verify any statement made on this application. The HECC may revoke any registration upon evidence that the applicant knowingly made any false statements in the application for this license. I understand that providing incomplete or inaccurate information *WILL* result in a delay of my renewal and may result in disciplinary action by the Higher Education Coordinating Commission.

Signature of Registered Teacher	Date

Signature of School Director	Date

**Social Security Number Requirement, Authority, and Disclosure Statement*

As part of your application for an initial or renewed registration as a teacher, director, or agent for a licensed private career school, as issued by the Higher Education Coordinating Commission, Office of Private Postsecondary Education, you are required to provide your Social Security Number (SSN) to the Commission as part of the application process. ORS 25.785 and 42 USC § 666(a)(13)

Your SSN will be stored in the Commission’s electronic database using the highest level of encrypted security protocols. It will be provided on a quarterly basis to the Oregon Department of Justice through secured electronic means for the purpose of enforcing child support orders. Your SSN will not be printed or displayed in any public forum through any medium unless expressly required by state or federal law.

Failure to provide your SSN will be a basis for the Higher Education Coordinating Commission, Office of Private Postsecondary Education, to refuse to issue or renew a license or registration as described above. Any other use or disclosure of your SSN will require your written authorization.

For questions you may contact the HECC at (503) 947-5716 or email Info.PPS@state.or.us

