



**FORMAL EDUCATION — MASTER'S DEGREE AND HIGHER\***

| College or University | Degree | Year of Graduation | Name of Institution |
|-----------------------|--------|--------------------|---------------------|
|                       |        |                    |                     |
|                       |        |                    |                     |
|                       |        |                    |                     |

**Public Librarian Experience**

| Library System | Position | Period of Experience<br>From Mo./Yr. To Mo./Yr. |
|----------------|----------|---|
|                |          |   |
|                |          |   |
|                |          |   |
|                |          |   |
|                |          |   |

**Last Assignment in a Maryland School System**

| School System | Position | Period of Experience<br>From Mo./Yr. To Mo./Yr. |
|---------------|----------|---|
|               |          |   |

**Certificates Held for Maryland Public Library or School Systems**

| Type of Certificate | Valid Dates<br>From To |  | Areas Certificated |
|---------------------|------------------------|--|--------------------|
|                     |                        |  |                    |
|                     |                        |  |                    |

**\*OFFICIAL TRANSCRIPT(S) OF THE MASTER'S DEGREE AND HIGHER MUST BE SUBMITTED IN ORDER TO PROCESS THE APPLICATION. Do not have transcripts sent directly to the Department of Education from a college or university. They should be submitted by the employer with this application.**

**PRIVACY NOTICE**

The principal purpose served by gathering the requested information is to provide necessary data and background records for the Superintendent of Schools as required by state law and regulation.

The consequence of refusal to provide the requested information is non issuance of a Maryland Certificate.

You have a statutory right to inspect, amend, or correct the requested information under State Government Article, §§10-611—10-629, Annotated Code of Maryland.

The requested information is not generally available for public inspection, unless authorized by State Government Article, §10-617(h), Annotated Code of Maryland.

The requested information is not routinely shared with other governmental agencies.

I hereby affirm under the penalties of perjury that the information given by me in this application is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time disclose any misrepresentation or falsification of a material fact, my application will be disapproved and/ or my certificate will be rescinded.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Email Address:

This application is being submitted for the above named individual who is currently employed in a Maryland public library system.

Date \_\_\_\_\_ Signature \_\_\_\_\_  
(Signature of Employer)

**DO NOT WRITE BELOW.**

**THIS SPACE IS RESERVED FOR THE DIVISION OF LIBRARY DEVELOPMENT AND SERVICES**

Verification of Renewal Credits:

| Professional Librarian |                |                | Director              |                |                |
|------------------------|----------------|----------------|-----------------------|----------------|----------------|
| Credits Required       | Credits Earned | Credits Needed | Credits Required      | Credits Earned | Credits Needed |
| 3                      |                |                | 6<br>Management/Admin |                |                |

| Coursework Completed: | Coursework Completed: |
|-----------------------|-----------------------|
|                       |                       |

**Staff Comments**

**THIS SPACE IS RESERVED FOR THE STATE OFFICE OF CERTIFICATION.**

| CERTIFICATE ISSUED  |          |             | STAFF COMMENTS |
|---------------------|----------|-------------|----------------|
| Type of Certificate | Position | Valid Dates |                |
|                     |          |             |                |
|                     |          |             |                |
|                     |          |             |                |
|                     |          |             |                |
|                     |          |             |                |