

**State of Nevada  
Department of Education  
Office of Teacher Licensing**

**Application for Additional Endorsement**

SS # \_\_\_\_\_ and /or License # \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street
City
State
Zip Code

Contact #: \_\_\_\_\_ (Email address) \_\_\_\_\_

Please indicate (  ) which of the following endorsements that you are applying for:

Elementary (K-8): Additional Subject Area \_\_\_\_\_

Middle School: ( 7-9) Subject Area \_\_\_\_\_

Secondary Academic (7-12): Subject Area \_\_\_\_\_

Secondary Occupational (7-12): Subject Area \_\_\_\_\_

Special (Various levels \*\*): Endorsements \_\_\_\_\_

**\*\*Includes varying grade/age level subject area teaching endorsements outside the main licensing levels noted above, including special education, administrative endorsements, and all non-teaching educational support specialities.**

***Official transcripts that list all coursework that qualify you for the endorsement(s) for which you are applying must be submitted with this application. If student teaching is reflected on your transcript as “field experience” or “practicum,” written verification must be provided and signed by the dean of the college/university. List below the transcripts that reflect these courses.***

University/College	State	Degree	Credits Earned

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

*The State of Nevada Department of Education is an Equal Opportunity / Affirmative Action Agency and does not discriminate on the basis of race, color, religion, sex, national origin, age political affiliation or disability.*

**For official use only:**

Receipt # \_\_\_\_\_ Fee(s) \_\_\_\_\_ Receipt Date \_\_\_\_\_

I have validated that the licensee has met all requirements (coursework, testing) for endorsement.  
 I have indicated any provisional requirements (See attached evaluation sheet).

\_\_\_\_\_  
Analyst Signature

\_\_\_\_\_  
Date

To apply for an additional endorsement to your existing valid Nevada license, you must submit the following documents:

- The completed application signed and dated.
- Official transcript(s) from all post-secondary institutions attended where the required course work for an additional endorsement was completed. Hand carried transcript(s) are acceptable as long as they are official. A transcript is considered official if it has the official school seal and the registrar's signature. **Photocopied transcripts and faxes are not accepted.**
- The applicant fee of **\$50.00 (non-refundable)** for each endorsement/license you are applying for. Payment must be by **cashier's check or money order** made payable to the Department of Education.

**If applicable:**

- ✓ Verification of work or teaching experience.
- ✓ A copy of a professional license/certificate from another state.
- ✓ If applying for a School Counselor endorsement, verification of completion of a school counseling practicum will be required. The verification must reflect the grade level of the practicum and a minimum number of 280 completed hours. This verification must be on college letter- head co-signed by the dean of the department.
- ✓ Applicants applying for a School Psychologist endorsement, who do not hold national certification, must verify an internship in school psychology as outlined in NAC 391.319.
- ✓ Applicants applying for a School Nurse endorsement must provide a copy of a valid license issued by the Nevada State Board of Nursing.

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**This form may be mailed to the appropriate office listed below.**

Northern Office  
700 East Fifth Street  
Suite 105  
Carson City, NV 89701-5096  
Phone: (775) 687-9115

Southern Office  
9890 S Maryland Pkwy  
Suite 231  
Las Vegas, NV 89183  
Phone: (702) 486-6458