

**LICENSURE STATUS VERIFICATION FOR CERTIFIED POSITIONS FORM  
MULTIPLE EMPLOYEES**

School Year: \_\_\_\_\_

Through my signature below, I hereby certify, as of the date of my signature below, that to the best of my knowledge the attached list of employees EITHER:

- (1) have a valid license issued by the Ohio Department of Education; or
- (2) the employee is a teacher, substitute teacher, or substitute educational aide who meets one of the exceptions listed in Revised Code Sections 3319.316, 3319.101, or 3319.088 AND the employee has submitted an application for licensure to the Ohio Department of Education.

Further, I certify that I, or my staff, have verified through the Ohio Department of Education's online educator profile tool\* that the person either holds a valid license/permit or has submitted to the Ohio Department of Education an application for the required license/permit.

\_\_\_\_\_  
Superintendent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Superintendent Name

Through my signature below, I hereby certify that I, or my staff, have received this form, along with any attachments, as of the date of my signature below. I further acknowledge that I am responsible for paying the employee, who is listed on this form, in accordance with Ohio law.

\_\_\_\_\_  
Treasurer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Treasurer Name

\*Note: the Ohio Department of Education's online educator profile tool to verify license and application status can be found at:

<https://coreprodint.ode.state.oh.us/core2.3/ode.core.EducatorProfile.UI/EducatorSearch.aspx>