

## **Teacher Standards and Practices Commission**

250 Division St. NE, Salem, OR 97301 www.oregon.gov/tspc

Contact.tspc@tspc.oregon.gov Fax (503) 378-4448

## Professional Educational Experience Report (PEER) Form

This form must be completed by school or school district Human Resources staff to verify experience when required for licensure. Experience may be required to move to a different license type, add endorsements to a teaching license or for waiving licensure requirements.

Please ty	pe or print in i	nk.			
TSPC Account number:			Date of Birth://		
Name:	(First)	(Middl	e)	(Last)	(Maiden)
<u>Position</u>	<u>held:</u>	☐ Teacher	☐ Pe	ersonnel Services	☐ Administrator
Grade Level(s)	Dates F From MM/YYYY	Position Held To MM/YYYY	% FTE		. Special Education Area(s) or NCES Codes.  connel Services positions: list job title.
Holders of their ongo Professior	f non-provisiona ing commitmer	nt to professional g nt while employed	r licenses a	are expected to complete this sect	ete Professional Development as part of ion if the applicant has completed awarded CEUs, PDUs or clock hours for
I hereby dates em	•	nis educator suc	ccessfully	/ completed	(number of) PDUs during the
☐ Not ap	plicable: The ed	ducator was not aw	arded credi	ts for Professional Dev	relopment completed during employment
You ma	ay choose to sen e name of the au	thorized representat	cally, or prin	t the form and sign it man chool district into the sign	nually. If you choose electronic submission, nature line. If the form is being signed to d representative of the school board.
Signatu	re			School or School District	Date
<i>HR</i> pers	sonnel completing t	the form:		Contact email address:	

**Oregon School Districts:** if you have access to the eLicensing District Portal, you may upload this form directly to the applicant's eLicensing account.

All others: email this form as an attachment to contact.tspc@tspc.oregon.gov or print and mail it directly to TSPC.