



# Application for Public Librarian Certificate

## GENERAL INFORMATION:

NAME: (Last) (First) (Middle)		
HOME ADDRESS: (Street) (City and State) (ZIP Code)		
HOME PHONE#: ( ) -	LIBRARY PHONE#: ( ) -	
MICHIGAN DRIVER'S LICENSE or ID#:	LAST 4 DIGITS OF SOC. SECURITY#:	
MAIDEN/FORMER NAMES:		

## EDUCATION:

HIGHSCHOOL:	City and State	Year of Graduation	
Enclose a photocopy of your high school diploma or transcript showing your graduation date (High school documentation is <i>not</i> required if you are a college graduate).			
COLLEGE/UNIVERSITY NAME:	City and State	Degree	Year Granted
LIBRARY SCHOOL:			
Notify the registrar's office of your college or university to send an <b>official</b> transcript of your highest academic degree <i>directly</i> to the Certification Office, Library of Michigan. If you have a master's degree in library science, please have evidence of that degree sent.			

## EMPLOYMENT EXPERIENCE: (Limit to Most Recent Ten Years)

Current Library Employer	Address	Employment Dates (Beginning-Ending)

Applicants eligible for permanent professional certification must also document four years of professional experience following receipt of their MLS degrees. Please have current or previous employers verify by letter your dates of employment, job title and professional responsibilities.

Do not use this form to request a change in your certification status or to renew a Level VII Certificate.

Mail completed application form to: CERTIFICATION OFFICE, LIBRARY OF MICHIGAN, P.O. BOX 30007, 702 W. KALAMAZOO, ST., LANSING, MI 48909. Direct questions regarding this form to the Certification Office, (517) 373-3746