

**VOLUNTARY SURRENDER OF CERTIFICATE(S)**

I hereby voluntarily surrender my certificate(s). Certificate No.: (545802A)

I further understand that the Superintendent of Public Instruction will notify other states and public and private school officials within the state of Washington that I have voluntarily surrendered my certificate(s).

Name: **NATASHA POLK** Certificate No.: **(545802A)**

I acknowledge, that by signing this voluntary surrender of my education certificate, I agree not to seek reinstatement of my educational certificate in the state of Washington.

Dated this 3<sup>RD</sup> day of December, 2025.

**NATASHA POLK**  
Printed Name  
  
Signature  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City, State, Zip