



# SUPERINTENDENT OF PUBLIC INSTRUCTION

Chris Reykdal Old Capitol Building · PO BOX 47200 · Olympia, WA 98504-7200 · <http://www.k12.wa.us>

RECEIVED

SEP 12 2023

## VOLUNTARY SURRENDER OF CERTIFICATE(S)

Office of Professional Practices

I hereby voluntarily surrender my certificate(s). Certificate No.: 558829H

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: Shane Stretch

Certificate No.: 558829H

I agree, if I request reinstatement of the certificate(s) I have voluntarily surrendered, to provide the Superintendent of Public Instruction with an affidavit describing in full the reasons for my voluntary surrender of the certificate(s) listed above.

Dated this 6<sup>th</sup> day of September, 20 23

Shayna Stretch

Printed Name

[Signature]

Signature

[Redacted Address]

Address

[Redacted City, State, Zip]

City, State, Zip

**SUBSCRIBED AND SWORN** to before me this 6<sup>th</sup> day of September, 20 23.

[Signature]

Notary Public in and for the state of

Washington

oe Washington Residing at Spokane

My commission expires: 06-18-2026

