

DEC 13 2019

Office of Professional Practices

**VOLUNTARY SURRENDER OF CERTIFICATE(S)**

I, Kevin Schmidt, hereby voluntarily surrender my certificate(s). Certificate #371263E

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).

1. Cont. Teacher Certificate No. 371263E

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 11<sup>th</sup> day of December, 2019.

Kevin Schmidt  
Printed Name

Kevin Schmidt  
Signature

[Redacted]  
Address

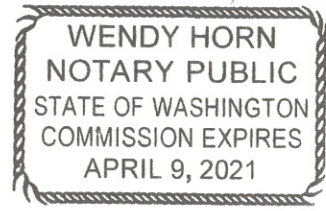
[Redacted]  
City, State, Zip

**SUBSCRIBED AND SWORN** to before me this 11<sup>th</sup> day of December, 2019.

[Signature]

Notary Public in and for the state of Washington

Washington Residing at Tumwater



My commission expires: 04/09/2021