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APR 26 2017

OFFICE OF PROFESSIONAL PRACTICES

VOLUNTARY SURRENDER OF CERTIFICATE

I, Bryson Condotta, have reason to believe that I am or might be ineligible to hold a certificate(s) for reasons which do or might constitute grounds for revocation of the certificate(s). Accordingly, I hereby voluntarily surrender the following certificate(s):

Washington Teaching Certificate No. 439093F

I have not been, to the best of my knowledge, convicted of any felony crime listed within WAC 181-86-013(1).

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. 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).

Dated this 29th day of March, 2017.

Bryson Condotta
Printed Name
[Signature]
Signature
[Redacted]
[Redacted]
Address