

JAN 26 2017

OFFICE OF PROFESSIONAL PRACTICES

VOLUNTARY SURRENDER OF CERTIFICATE(S)

I, Michael L. Smith, 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):

1. <u>Cont Tchr</u>	Certificate No. <u>328603F</u>
2. <u>CTE Cont Tchr (Renewal)</u>	Certificate No. <u>328603F</u>
3. <u>CTE Director</u>	Certificate No. <u>328603F</u>
4. <u>Residency Admin (F1)</u>	Certificate No. <u>328603F</u>

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

I, Michael L. Smith, in addition to voluntarily surrendering the following certificates, I voluntarily and knowingly agree not to seek reinstatement of the above certificates and agree not to seek issuance of any other Washington State Education certificate or issuance of an education certificate in any other state.

I further understand that the Office of 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 23 day of January, 2017.

Michael L. SMITH
Printed Name
Michael L. Smith
Signature

Address

City, State, Zip