



Date Received by SD DOE:
Form EPV7 (07-2017)

Office of Educator Certification
PRINT ALL INFORMATION IN BLUE OR BLACK INK!

Educator Permit District Intent to Employ
International Exchange Teacher

Part 1 – Applicant Information to be completed by the employing school district.

Last Name	Last 4 digits of the SSN	-	
First Name, MI	Maiden/Previous Last Name		
Foreign educator			

Part 2 – Public or Department-Accredited school intent to employ through international exchange teacher permit.
Email completed form to certification@state.sd.us

Public or Department-Accredited School	School Building Name
Grade Level	Content Area
Class Assignment(s)	

We, the public or Department-accredited school plan to employ the named applicant through the international exchange teacher permit. We understand that the permit is a five-year nonrenewable permit that is issued to an eligible teacher from another nation to teach for up to five consecutive years. The international exchange teacher permit is limited to the fields identified as comparable to fields in South Dakota by an approved foreign transcript evaluation agency.

Print Name of Authorized Official	Title of Authorized Official		
Email Address	Telephone (including area code)		
Address	City	State	Zip Code
Signature of Authorized Official			Date

Email: certification@state.sd.us

Mailing Address: Department of Education, Certification Office, 800 Governors Drive, Pierre, SD 57501