**Request for VAC Certificate**

E-mail the following paperwork to teacher@liberty.edu:

* Completed *Request for VAC Certificate*
* Copy of your FES (*Field Experience Summary)*
	+ May be completed in EDSP 324, 364, 414, 474, or student teaching

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| --- | --- | --- |
| Last Name: | First Name: | Middle Name:  |
| Maiden Name(if applicable): | Social Security Number: | Liberty ID# |
| Address (Street, City, State, Zip Code) |
| Requested:***VAC Certificate**** Virginia Autism Council Certificate
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