STATE OF MINNESOTA DEPARTMENT OF EDUCATION

LICENSE

CHAD ALLAN STROMLUND

ISSUED TO:



RECORD OF ISSUANCE MINNESOTA LICENSE

DATE OF ISSUANCE: 02/02/16

TO: CHAD ALLAN STROMLUND

FILE FOLDER NUMBER: 491614

Inquiries should include the Name, License Type and File Folder Number of the licensee as listed on this license, and should be directed to the Educator Licensing Section, 1500 Highway 36 W. Roseville, MN 55113-4266, or call (651)582-8691

FIL	E.	FOL	DER	NUM	IBER	:49	1614
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Function Number	I EVEL	SCOPE FULL TIME	FUNCTION CODE 130200	FUNCTION DESCRIPTION LIFE SCIENCES	EXPIRATION DATE June 30.
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SERIAL NUMBER:

FUNCTION

Renewal Conditions / Limitations / Comments

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You have been issued a full-time limited license. This license is valid for full-time employment in the issued field and student level as requested by the school district or charter school for this school year or a portion thereof from the date of issuance to the following June 30. This license may include summer school instruction and/or services. You are encouraged to contact a Minnesota college/university approved to offer this preparation program to determine what additional coursework may be required to obtain Minnesota licensure This license is valid You may be required to obtain Minnesota licensure.

This is your first of three full-time limited licenses permitted under Minnesota Rules.

This license may be renewed after July 1.

NOTE: IT IS THE LICENSEE'S RESPONSIBILITY TO EXAMINE THE LICENSE FOR ACCURACY. PLEASE CONTACT EDUCATOR LICENSING WITHIN 30 DAYS OF THE ISSUE DATE IF YOU BELIEVE THIS LICENSE CONTAINS ANY ERRORS OR OMISSIONS.