



| 2 Pine Tree Drive, Suite 306 | Arden Hills, MN 55112 | 651-582-8888 | [bosa.mn.gov](http://bosa.mn.gov) |

## Administrative Variance for a Lapsed License

In accordance with [Minnesota Rule 3512.2300 Subp. 4](#), if a license is not renewed within 60 days, it becomes lapsed.

### Current administrators or supervisors:

Individuals must obtain a special permission (variance) from the Minnesota Board of School Administrators (BOSA) to renew the license.

### For those not in an administrative or supervisory role:

Individuals can obtain a one-year license if they have a job offer requiring an administrative license and have not collected 125 BOSA-approved Continuing Education Units (CEUs). The one-time nonrenewable license cannot be extended.

By the end of the one-year license period, individuals must meet standard renewal requirements and have completed 125 BOSA-approved hours.

The BOSA Licensing Committee reviews the variance request. The Committee meets once a month. The Licensing Committee reviews the variance, and their recommendation is brought to the board for approval or disapproval. BOSA will send the petitioner an Order Granting Variance from Board Rule and the special permission will be noted on the individual's license. This can be viewed under [License Lookup](#).

### To be considered for a variance, an individual must complete the following and email the completed form to the executive director:

- Verify that all administrators within the school district have paid the annual BOSA fee of \$100. This fee is due November 1st of each school year.
- Include a \$55 check made out to the Board of School Administrators for the variance.
- Include a copy of school board minutes that show action was taken regarding a variance request, if applicable.
- Complete the Request for Administrative Variance Form.

# Request for Administrative Variance for a Lapsed License Form

District and ISD number:

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Name and email address of the individual filling out this form:

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Name and File Folder Number of the individual for whom the variance is requested:

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Administrative license requested for variance:

Superintendent

Principal K-12

Director of Community Education

Director of Special Education

Job title: \_\_\_\_\_

Is this individual retired?

Yes

No

Did any applicant holding an appropriate administrative license apply for the position?

Yes

No

If yes, how many? \_\_\_\_\_

If applicable, describe why the district made the decision not to contract with a fully licensed administrator:

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Please list the unlicensed individual's additional skills, experience, education, or other qualifications that better align with the requirements of the position:

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Has the district conducted the appropriate background checks of the applicant?

Yes

No

If no, explain why: \_\_\_\_\_

Explain why the administrator was unable to renew their license on time:

\_\_\_\_\_

How many BOSA-approved clock hours does the individual have?

\_\_\_\_\_

*\*Note: The individual must obtain 125 BOSA-approved CEUs within the variance or one-time nonrenewable license period. No future renewals can be approved until clock hours have been earned.*

How will the district support the individual in earning their clock hours?

\_\_\_\_\_

I attest that the information stated in this variance request is accurate to the best of my knowledge.

\_\_\_\_\_

District Superintendent, School Board Chair, or Administrative Designee

\_\_\_\_\_

Date

Once an administrative variance has been approved, the administrator must fill out the [Minnesota Educator Renewal License Application](#) and submit a renewal fee to the Professional Educator Licensing and Standards Board (PELSB). BOSA advises including a copy of the Order Granting Variance when submitting the License Renewal Application. Please review your administrative license within 30 days of approval to ensure accuracy.

Administrators can visit [mn.gov/pelsb/current-educators/renew](http://mn.gov/pelsb/current-educators/renew), email [pelsb@state.mn.us](mailto:pelsb@state.mn.us), or call 651-539-4200 for more information about renewing their license.

### In-Office Use

Date Received: \_\_\_\_\_

Complete?  Yes  No

If incomplete, please send: \_\_\_\_\_