



CANNON BUILDING  
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DOVER, DELAWARE 19904-2467

STATE OF DELAWARE

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## REQUEST FOR CONSIDERATION OF MILITARY EDUCATION, TRAINING OR EXPERIENCE INSTRUCTION SHEET

### Background

Delaware law allows professional licensing boards to consider your military education, training, or experience (METE) when determining whether you qualify for a professional license. To give credit for the METE, the Board must determine, based on the proof you submit, that your education, training, or experience is substantially equivalent to the licensure requirements in the law and regulations for your profession. In addition, you must meet all other licensure requirements, such as passing an examination. See [29 Del. C. §8735\(p\)\(6\)](#).

### When to Submit

Submit a METE request **only if** you meet **all** of these conditions:

- You are a member of the active duty military, National Guard, military reserve, retired military or a military veteran.
- You are filing a license application at the same time as this request, **or** you have already filed the application and it is still pending.
- You believe you can meet the education and/or experience requirements of licensure **only if** given credit for METE.

### Requirements

The following are requirements for submitting a METE request. It is not necessary to re-submit any documents already submitted for your professional license application.

- Submit a completed, signed and notarized [Request for Consideration of Military Education, Training or Experience](#).
- Enclose a copy of official verification that you are a member of the active duty military, National Guard or military reserve, retired military, or a military veteran (e.g., orders, DD214).
- Submit any relevant/related proof of your METE (e.g., training certificates). The documents should contain enough information to enable the Board/Commission to compare the military education, training or experience you have completed to that required by law and regulations.



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## REQUEST FOR CONSIDERATION OF MILITARY EDUCATION, TRAINING OR EXPERIENCE

### TYPE OF PROFESSIONAL LICENSE

1. Enter the following information about the type of professional license you are applying for.

Profession: \_\_\_\_\_ License Type: \_\_\_\_\_  
Examples: Physical Therapy, Electrical, HVACR, Dentistry Examples: Master Electrician, Dental Hygienist

2. You must apply for your professional license *in addition* to submitting a METE request. Check one:

- I am applying for a professional license at the same time as this request.  
 I have already applied for a professional license, and it is still pending.

### IDENTIFYING INFORMATION

3. Name: \_\_\_\_\_  
Last First Middle

4. Do you have a U.S. Social Security Number? Yes  No  If yes, enter your SSN: \_\_\_\_\_

### MILITARY SERVICE

5. Check your current military status:

- Active Duty  Reserves  Retired Military  
 National Guard  Veteran

**Enclose a copy of official verification that you are a member of the active duty military, National Guard or military reserve, retired military, or a military veteran (e.g., orders, DD214).**

6. Can you meet the licensure requirements without credit for your METE? Yes  No  If yes, STOP. A METE request is not necessary if you can meet the requirements without METE.

7. Explain why you believe you need credit for your METE to qualify for a license. If you need more room to explain, attach an additional sheet.

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8. List the following about your military experience, training and education. Give dates and examples of items for which you would like to receive METE credit. Attach additional examples if needed.

DESCRIPTION	TYPE (check one)	DATES COMPLETED (month/year)	
	<input type="checkbox"/> Education <input type="checkbox"/> Training <input type="checkbox"/> Experience		
	<input type="checkbox"/> Education <input type="checkbox"/> Training <input type="checkbox"/> Experience		
	<input type="checkbox"/> Education <input type="checkbox"/> Training <input type="checkbox"/> Experience		
	<input type="checkbox"/> Education <input type="checkbox"/> Training <input type="checkbox"/> Experience		
	<input type="checkbox"/> Education <input type="checkbox"/> Training <input type="checkbox"/> Experience		

**Submit any relevant/related proof of METE (e.g., training certificates). The documents should contain enough information to enable the Board/Commission to compare the military education, training or experience you have completed to that required by law and regulations.**

### AFFIDAVIT

The undersigned, being sworn, deposes and says he or she is or was a member of the military requesting credit for military education, training or experience based on Title 29, Section 8735, of the *Delaware Code*; that he or she is the person who executed this request; that all statements and answers herein are truthful; that he or she has not suppressed any information that might affect this request; that he or she has read and understands the boards rules and regulations; and that he or she has read and understands this affidavit and that fraud or misrepresentation is grounds for denial of or later revocation of a license.

**Signature of Applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_

State of \_\_\_\_\_ County of \_\_\_\_\_

Sworn to before me and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_ 2\_\_\_\_\_.

Signature of Notary: \_\_\_\_\_

SEAL

My commission expires: \_\_\_\_\_