VERIFICATION OF EXPERIENCE

If experience is a requirement for your credential, please have the experience verified by your current and/or previous employer using this form. You only need to verify experience that is appropriate for the issuance of this credential. If you have served more than one term of employment for a single employer, indicate in the additional section below. If you have served in more than one type of position (e.g. both teacher and counselor) for a single employer, have a separate form completed for each position that you have held.

This is to certify that: _____
(Name of Applicant)

has served from: _____ to _____
(Month/Year) (Month/Year)

and _____ to _____
(Month/Year) (Month/Year)

in the position of (check one):

- ☐ Teacher
- ☐ Administrator
- ☐ Education Specialist
- ☐ Counselor
- ☐ Resource Specialist
- ☐ Other (specify) : _____

In the following grade of: _____

In the area or subject of: _____

- ☐ Full-time
- ☐ Part-time (specify) : _____ hours/d _____days/week
- ☐ Day-to-Day Substitute

School/Agency: _____

Address: _____

Telephone: _____

Verified by: _____
(Signature)

Name: _____

Email Address: _____

Title: _____ Date: _____