

REQUEST FOR VERIFICATION OF EMPLOYMENT

TO FORMER EMPLOYER

Date _____

Social Security No. _____

Birthdate _____

The following information is necessary for the establishment of my correct salary rate. At your earliest convenience, will you verify my employment experience on LETTERHEAD STATIONERY AS INDICATED BELOW.

- ____ Regular Teacher, Administrator, or Instructor (See 1 below) from _____ to _____
Mo./Year Mo./Year
- ____ Substitute Teacher (See 2 below) from _____ to _____
Mo./Year Mo./Year
- ____ Adult or Evening School Teacher (see 3 below) from _____ to _____
Mo./Year Mo./Year
- ____ Other paid experience (See 4 below) from _____ to _____
Mo./Year Mo./Year

1. Please verify **REGULAR TEACHING** as:
 - a. Full-time teaching or the exact fractional part of a full-time assignment.
 - b. The **school** years in which service was rendered.
 - c. The total number of **school** years served.

EXAMPLE. . . was employed full-time (or on a ¼, ⅓, ½, etc. assignment) as a teacher, administrator, or instructor from September, 1976, to June, 1981, a total of five school years.
2. Please verify **SUBSTITUTE TEACHING** in terms of total days served per school year for each year of service.
 Example . . . Was employed as a substitute teacher for 50 days 1975-76, 101 days 1976-77, etc.
3. Please verify **HOURLY RATE TEACHING (ADULT, EVENING SCHOOL, ETC.)** in terms of total hours served per school year for each year of service.
 EXAMPLE. . . Was employed as an hourly rate teacher for a total of 82 hours 1975-76, 456 hours 1976-77, etc.
4. Please verify **OTHER PAID EXPERIENCE** by calendar year, including beginning and ending dates. Indicate if full-time; if less than full-time, verify hours per week.

PLEASE ADDRESS AND RETURN THE OFFICIAL VERIFICATION ON LETTERHEAD STATIONERY TO:

PRINT	APPLICANT'S FULL NAME		
PRINT	RETURN ADDRESS		
PRINT	CITY	STATE	ZIP CODE

Signature of Applicant _____