



## Prior Experience Verification for School: Teachers, Service Providers, and Administrators

The purpose of this form is to verify school-based employment history for the employee named below. Section I must be completed by the employee. Section II must be completed by the verification official of the employing agency.

### I. Employee Information

Employee full name:			
SSN (last 4 digits):		Date of Birth:	
Mailing address:			
Email address:		Phone:	
<b>Name of school where employment was completed</b>	<b>Job Title (e.g., teacher, counselor, principal)</b>	<b>Subject area/Grade level</b>	
<p>I hereby authorize OSSE to share or obtain any information regarding this form with a former, current, potential employing agency, or other credentialing agency for use in my application process. I certify that the information listed on this form is accurate, complete and true. I understand that any finding of misrepresentation may result in the denial of my application and/or revocation of my educator credential.</p>			
Employee signature:		Date:	

### II. Verifying Official's Information and Verification

Please verify employment experience for the employee named above. Once completed, this form should be returned to the employee to be submitted with their application. If your agency issues a system-generated employment verification report that document may be submitted in lieu of this form.

School name:				
State:				
School type:	Public	Public Charter	Private	Other:
Is the school accredited:				
Employee employment type:				
<b>Position title</b>	<b>Subject/assignment area</b>	<b>Grade level</b>	<b>Start date</b>	<b>End date</b>

<b>Verifying official's original or electronic signature</b>	<b>Printed name</b>	<b>Title</b>
<b>Email address</b>	<b>Phone number</b>	<b>Date</b>