THOMPSON SCHOOL DISTRICT

Return to Human Resources by one method below:
Email: dana.medich@tsd.org
Fax: Attn: Dana Medich at 970-613-6169

Verification of Teaching Experience

1. **Personal Data** - to be completed by applicant

NAME: _____
(Last) (First) (M.I.) (Former—if applicable)

MAILING ADDRESS: _____
(Street) (City) (State) (Zip Code)

SIGNATURE OF EMPLOYEE: _____

2. **Teaching/Administrative Experience** - *to be completed by responsible school official. List chronologically each school year of teaching service rendered by the applicant. Please email, fax, or return the original by mail to the attention of* ***Dana Medich*** *at the above address.*

SEE REVERSE SIDE FOR * ITEMS

School Year During Which Service was Rendered	Name of School	Position Held	* 1 Type of School	*2 Accredited (Yes/No)	Length of School Term (Days)	*3 Number of Days Employed	*4 Hours per Day	Teaching License Required (Yes/No)	Type of Teaching (Full Time/ Part Time)

I CERTIFY THAT ABOVE INFORMATION IS TRUE AND CORRECT ACCORDING TO OUR OFFICIAL RECORDS.

Signature of Certifying Officer Title Phone Date

School District Mailing Address City State Zip Code

Verifications received within 90 days of the start dates will receive retro pay.
Verifications not received 90 days after the start date will be effective the month they are received and will not receive retro pay back to the start date.

THOMPSON SCHOOL DISTRICT

Verification of Teaching Experience Items Legend

***1** TYPE OF SCHOOL--

- PUB for Public
- PRI for Private
- DEN for Denominational
- IHL for Institution of Higher Learning
- FGN for Foreign School.

***2** ACCREDITED—A school will be considered accredited only if officially accredited by a state Department of Education, a territorial accrediting association, one of the regional accrediting associations (i.e. Southern ,Northwest, etc.), schools operated by the U.S> in foreign countries when the school has been accredited by a recognized agency of the U.S.

***3** NUMBER OF DAYS EMPLOYED—Actual days served should include all paid personal or sick leave taken as work days during the school year. One full year of experience will be granted for a minimum of 120 or more days for a total of four (4) or more hours each day in a continuous assignment in a given school year.

***4** HOURS PER DAY EMPLOYED—Indicate the numbers of hours in a normal work day for assignment.