



VERIFICATION OF PREVIOUS EMPLOYMENT
HUMAN RESOURCES
SCHOOL DISTRICT U-46

Addressed to Previous Employer: Date:

The person named below has been employed by our school district. In order to allow credit on our salary schedule for prior experience, it is necessary for us to have verification of the employment experience in your school/agency.

I certify that I have been employed by the school/agency addressed above and hereby authorize representatives of that agency to release the employment information requested below:

Signature of New Employee

Employee's Last Name First Middle Maiden Name (if app.)
Social Security Number: School / Location Served in:

This section to be completed by previous employer only

The teacher named above requests verification of service:

Beg. Month / Year To End Month / Year Full Time Part time Grade or Subject Taught

What was the nature of the separation of this employee?

- Voluntary
Dismissed (if checked, please explain.)

Would you re-employ this person?

- Yes
No (if checked, please explain.)

I hereby certify that according to the records on file with this school/agency, the above mentioned person provided the services indicated while in possession of a proper license, credential, or permit as required by law.

Signature of Person completing this form

Title of Person completing this form

Agency

Telephone Number

Fax Number

Date

UPON COMPLETION
PLEASE RETURN THIS FORM TO:

Human Resources Department
School District U-46
355 E. Chicago Street
Elgin, IL 60120

Attention: General Ed / Spec Ed / Bilingual Program
Fax: 847-888-7188