

THE SCHOOL BOARD OF BROWARD COUNTY, FLORIDA

Employer Verification of Non-Teaching Related Work Experience Credit

Candidate: Per the Teacher's Collective Bargaining Unit Agreement in effect 7/1/2014, you may be eligible to receive up to a total of 13 years combined work and teaching-related experience credit. Complete this section and send a copy to each employer from whom you are requesting a verification of your related past work experience. Note that incomplete forms will not be reviewed by the District. Verification of previous employment must be received no later than four (4) months from the beginning date of employment of any school year to be effective during that school year (Teacher Contract Agreement 19-E).

Last Name (Print)

First Name (Print)

Social Security Number

Date Completing

Choose One:

- I am seeking a position.
 I have secured a position for _____ at _____

School Year (i.e. 2014-15)

Location Name

Employer: The instructor's step level on the School Board of Broward County teacher salary schedule will be determined based upon your verification of directly related past work experience. You are asked to:

- 1) Complete this form in its entirety.
- 2) Attach a job description detailing the responsibilities for the position that you are verifying.
- 3) Return both this form and the job description to **School Board of Broward County, Florida, Instructional Staffing, 600 SE 3rd Avenue, Ft. Lauderdale, FL 33301.**

Business Name: _____

STATUS OF EMPLOYMENT

Full Time or Part-Time

Average number of hours worked per week _____

List of employment dates:	Month	Day	Year
From:			
To:			

Job title: _____

Employer, attach a job description for the above listed job previously held by the applicant

If appropriate, verify that the position was one of the following:

- self-employment, family-owned business, or a firm no longer in business.

If no, please explain: _____

EMPLOYER INFORMATION

Print Name: _____ Signature: _____

Position Title: _____ Name of Firm / Organization: _____

Telephone Number: () _____ Web site: _____

Address: _____ Date: _____

Notary: _____