THE SCHOOL DISTRICT OF OSCEOLA COUNTY, FLORIDA HUMAN RESOURCES DEPARTMENT 799 Bill Beck Boulevard Kissimmee, Florida 34744 INSTRUCTIONAL EXPERIENCE VERIFICATION

To Whom It May Concern: I am presently employed by The School District of Osceola County, Florida. In order to substantiate my previous employment for salary purposes, will you kindly verify my dates of employment below. Your promptness in returning this form directly to the address above will be appreciated. My salary placement is pending receipt of this information.

Print	Social	Position with
Name	Security No	Osceola County

Signature _____

Date Approximate Date(s) of Employment

PREVIOUS SCHOOL DISTRICT: PLEASE COMPLETE THE INFORMATION BELOW. HAVE THE FORM NOTARIZED OR USE SCHOOL BOARD SEAL AND RETURN FORM TO THE ADDRESS ABOVE.

Please list successful years of performance YEARLY beginning with July 1 and ending with June 30.

SUBJECT TAUGHT: _____

NAME		School Year		Was the performance satisfactory?	Number of Days	Full-	Part-
OF SCHOOL	PRIVATE	BEGINNING DATE Mo/Day/Yr	ENDING DATE Mo/Day/Yr	Indicate for each year Yes or No		Time	Time

At the time service was performed, the above system or college was accredited by the:

(State Department of Education or Accreditation Agency)

Did this individual hold a FULL-TIME Teaching Certificate issued by the State Department of Education in your state? Yes No

School District Authorized Signature (Sign in front of Notary or use School Board Seal)		D	ate	Subscr
Title	School Di	strict		– He/she as iden Notary S
Address	City	State	Zip	-
Area Code Telephone Number and Extension	Email Add	dress		_

Would you re-employ? Yes No Did this individual hold a continuing contract or Professional Services Contract?

Is this individual retired from your State/Public Retirement System?

State of	_ County of	f
Subscribed and sworn before me on	by Date	Print Name-School District Authorized Signature (affiant)
He/she is personally known to me or ha as identification. Notary Seal Or School Board Seal below	s presented	Type of identification

Notary's Signature

Name of Notary typed, printed or stamped