



# COLLEGE OF EDUCATION EMPLOYMENT VERIFICATION FORM

- Graduate Studies
- Admission to Candidacy
- Internship/ Internship II

## SECTION A PLEASE PRINT LEGIBLY. THIS SECTION SHOULD BE COMPLETED BY THE STUDENT.

### DEGREE SOUGHT

- Bachelor
- Master of Arts in Teaching
- Master of Education
- Other: **(Please identify)**

### ACADEMIC DEPARTMENT

- Early Childhood Education (P-5)
- Middle Grades Education (4-8)
- Secondary Education (6-12)
- Health & Physical Education (P-12)
- Special Education (P-12)
- Mathematics (P-12)
- Art / Music (P-12)
- Spanish (P-12) / English (P-12)
- Other: **(Please identify)**

- Home
- Work
- Mobile

BIRTH DATE (MM/DD/YYYY)

CURRENT AASU STUDENT ID

TELEPHONE NUMBER(S)

NAME

(LAST

FIRST

MIDDLE)

FORMER/MAIDEN (IF APPLICABLE)

ADDRESS

CITY

STATE

ZIP CODE

COUNTY

## SECTION B THIS SECTION SHOULD BE COMPLETED BY THE SCHOOL'S PRINCIPAL OR THE PRINCIPAL'S DESIGNEE.

PRINT NAME

TELEPHONE NUMBER(S)

PRINT TITLE

E-MAIL ADDRESS

PRINT SCHOOL NAME

PRINT SCHOOL DISTRICT

PRINT SCHOOL'S MAILING ADDRESS

I, the undersigned, hereby certify that \_\_\_\_\_

is currently employed as a **full-time teacher**\* at the aforesaid public school.

PRINCIPAL'S SIGNATURE

DATE

\* This form should not be used for paraprofessionals or substitute teachers.