



**VERIFICATION OF EXPERIENCE**

The Holmes County Consolidated School District requires verification of relevant work experience for the issuance of a contract of employment. If the experience was completed under more than one employer, a separate form must be submitted for each employer.

**TO BE COMPLETED BY THE APPLICANT:**

\_\_\_\_\_

*Last Name*                      *First Name*                      *Middle/Maiden*                      *Last 4 of SSN*

**TO BE COMPLETED BY CURRENT AND/OR PREVIOUS EMPLOYER:**

This is to certify that \_\_\_\_\_ has served satisfactorily in our district/school/organization in the following position(s) during the dates specified:

<b>Name of District/School/Organization</b>	<b>Start Date Month/Day/ Year</b>	<b>End Date Month/Day/ Year</b>	<b>Total Years</b>	<b>Position/ Grade Level</b>	<b>*School State Accredited? Yes/No/NA</b>
					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA
					<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA

**Note:** Teaching/Administrative Experience is defined as experience accrued by a properly licensed staff member under legal contract with an accredited public or private elementary or secondary (N-12) school, or Teaching/Administrative experience accrued at a state-approved or regionally/nationally accredited Community/Junior College or Institution of Higher Education. Experience as an intern, graduate assistant, student teacher, or in a position such as substitute teacher, aide, or clerical worker will not be considered.

\_\_\_\_\_

*Signature of Superintendent or HR Personnel Staff*

\_\_\_\_\_

*Title*

\_\_\_\_\_

*Typed or Printed Name*

\_\_\_\_\_

*Phone*

\_\_\_\_\_

*Name of District/School/Organization*

\_\_\_\_\_

*State*

\_\_\_\_\_

*Date*

**Please return this form to Bernita Washington at [bwashington@holmesccsd.org](mailto:bwashington@holmesccsd.org), or [smayers@holmesccsd.org](mailto:smayers@holmesccsd.org). Please direct all questions to our office at 662-834-2175.**