



# OFFICIAL VERIFICATION OF LICENSED PROFESSIONAL SERVICES

New Employees must send this form to their former employer(s) for verification  
 Service credit cannot be given without a completed verification of experience form

Human Resources  
 1225 E 13200 S, Draper UT 84020  
 Phone: 801-572-9007  
 Fax: 801-572-9875

<b>Name: Last, First, MI</b>	<b>Last 4 of Social Security #</b>	<b>Instructions:</b> This form is used to determine placement on the salary schedule for licensed New Hires with Summit Academy,  Please provide Official Verification of Experience (under contract) with a valid professional license.  <i>Substitute, Internship, and University teaching experience do not count towards service credit.</i>
<b>Address:</b>		
<b>Name under which service was rendered (if different from above):</b>	<b>Current Location</b>	

School Year During Which Service Was Rendered		School	Type of School	Position Held	Days in Full Contract	Actual Days Served	Hours per Day Employed	Full Time	Part Time
Beginning	Ending								

<b>Is this individual eligible to be rehired in your district/company?</b>	<b>Yes</b>	<b>No</b>	<b>Total Experience:</b>  Years _____ Months _____
<b>Is a valid license required for the position(s) listed above?</b>	<b>Yes</b>	<b>No</b>	
<b>Is your school accredited?</b>	<b>Yes</b>	<b>No</b>	

**I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT ACCORDING TO OUR OFFICIAL RECORDS:**

School District	Signature of Certifying officer
Mailing Address	Title
Phone Number	Date