

VERIFICATION OF EXPERIENCE

The Mississippi Department of Education requires verification of relevant work experience for the issuance of certain educator and/or administrator licenses. If verification of relevant work experience is required for obtaining your Mississippi educator/administrator license, please have the experience verified by your current and/or previous employer using this form. You only need to verify experience that is appropriate for the issuance of this credential. If the experience was completed under more than one employer, a separate form must be submitted for each employer.

TO BE COMPLETED BY APPLICANT:

_____ - _____ - _____
Last Name First Name Middle/Maiden Social Security Number

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:

Name of District/School/Organization	Start/Ending Date Mo/Day/Year	Total Years	Position/ Grade Level	*School State Accredited? (Yes/No/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.

***Select "NA" if applying for Three-Year District Superintendent License.**

Signature of Superintendent, Principal, or Personnel Director

Title

Typed or Printed Name

Phone

Name of District/School/Organization

State

Date