

One of the requirements for granting a credential and/or certificate to teach career and technical education classes is the verification of successful paid occupational experience in the specific program area to be taught. This form is to verify your work experience history and must be attached to the Application for Career and Technical Education Certificate/Credential/Endorsement (SFN 5415) and submitted to CTE.

## **Completed by Applicant**

Name	Telephone Number
Hame Address (City, State, Zin Code)	
Home Address (City, State, Zip Code)	

## Completed by Employer (Return to Applicant)

Employer		Telephone Number		
Address (City, State, Zip Code)				
The above named applicant was employed as: (job titl	e) Total hours of	of employment in job posit	ion:	
Description of job duties:				
Above named applicant was employed by us From: To: To: (Month/Year)				
Comments (optional):				
Authorized Signature	Title		Date	

The State Board for Career and Technical Education does not advocate, permit, nor practice discrimination on the basis of sex, race, color, national origin, religion, age, or disability as required by various state and federal laws.