

EMPLOYMENT VERIFICATION FORM

TEACHER'S NAME _____

DATE _____

Students with a Certificate of Eligibility (CE) in General Education must teach under the Provisional Teaching Program with the NJ Department of Education in order to advance their CE in General Education to a Standard Certificate through their school district. Please indicate which alternate route academic program you are applying to:

_____ ESL Alternate Route

_____ P-3 Alternate Route

_____ Teacher of Students with Disabilities
Alternate Route

_____ Elementary, Middle, and Secondary
Education Alternate Route

The bottom portion of this form must be completed by a school district administrator for the above-mentioned teacher.

TEACHING POSITION (GRADE LEVEL AND/OR SUBJECT) _____

SCHOOL DISTRICT _____

SCHOOL NAME _____

CONTRACT START DATE _____

CONTRACT END DATE _____

WILL THIS TEACHER BE ENROLLED IN THE NJ DEPARTMENT OF EDUCATION PROVISIONAL TEACHING PROGRAM? _____

DISTRICT ADMINISTRATOR (PLEASE PRINT) _____

TITLE: _____

ADMINISTRATOR'S SIGNATURE: _____

Please mail or fax back to:

Kean University
Office of Graduate Admissions
1000 Morris Avenue
Union, NJ 07083
Phone 908-737-4723
Fax 908-737-5925

Please Note: The school's letterhead must appear at the top of this form