MISSISSIPPI COLLEGE EDUCATIONAL LEADERSHIP PROGRAM VERIFICATION of TEACHING EXPERIENCE

Applicants for leadership programs are required to show proof of at least three (3) years of teaching experience. This form should be completed and included as part of the applicant's portfolio, which is submitted directly to the program coordinator.

| To be completed by applicant: | | | | |
|--|---|----------------|-----------------------|--|
| Name | MC ID # | | | |
| Last First Address | Middle/Maiden _City, State, Zip | | | |
| **NOTE: If your three years' te make a copy of this form to send | | between two | or more school distr | ricts, you may |
| The information below is to Resources office and return | | | | |
| This is to certify that educa | | | | |
| has successfully completed | years of | experience | e as a K-12 classro | oom teacher |
| in our district: | | | | |
| accrued at a state-approved or region Learning. * Examples: 2 nd grade elementary Educational experience as an interpaide, or clerical worker will not be | teacher,8 th grade biology tea n, graduate assistant, student | acher, etc. | | - |
| Name of School | Start/Ending Date Mo/Day/Year | TOTAL YEARS | POSITION Or GRADE* | School State Accredited? (Yes or No) |
| | | | | |
| Signature of Human Resources or Personnel Director | | Position | | |
| Name of School District | | Date | | |
| State | | Phone | | |