

OFFICIAL VERIFICATION OF EMPLOYMENT

Candidate is to send this form to former employers for verification.

Human Resources 2500 South State Street

Salt Lake City, Utah 84115-3110 385-646-4511 FAX 385-646-4204

Name: Last, First, M.I.	Social Security Number: XXX – XX – _{last 4 digits only}	Name under which service was rendered if different:	Instructions This form is used to determine placement on the salary schedule for licensed personnel who have been employed by Granite School District.
Address: Street, City, State, Zip Code	We appreciate your help in providing the official verification of experience <u>under contract, with a</u> valid license, in your district.		
Employee Signature: I hereby give my permission to release the info Resources Department of Granite School District.	rmation requested below to the Human	Date:	Substitute experience is not counted as contract. Service credit cannot be given without verification of experience.

Record of Contract Service (to be completed by responsible District or Human Resources official)

School Year During Was Rendered	Which Service	School	Type of School	Position	Days in Contract	Actual Days Served	Hours Per Day	Full Time Equivalency
Beginning Date	Ending Date		Public/Private		Year		Employed	(percentage)

Is a license required for the position(s) listed above?

🗆 Yes 🛛 No

School District	Address (Street, City, State, Zip Code)	Phone Number	
Name of District or Human Resources Official (type or print)	Title	FAX Number	
Signature of District or Human Resources Official	Date		

Please mail the completed form to Granite School District, Human Resources Department, at the address above. Or you can fax this form to **385-646-4204**.

Thank you for completing this form,

Donnette McNeill-Waters Director, Human Resources