

EDUCATIONAL EMPLOYER VERIFICATION INFORMATION SHEET

APPLICANT INFORMATION		
Applicant Name:		
worked with children. Please list all of your previous completed this form, please complete the State of	iformation verifying information regarding any employment where you have us employers and provide contact information for each. Once you have Connecticut Educational Employer Verification form for each previous	
	Please bring copies and/or submission confirmations of your submitted ou submit your hiring paperwork to Central Office.	
I have NOT previously worked for any en (initials)	nployers in a capacity where I had direct contact with children.	
	n a capacity where I had direct contact with children. PREVIOUS EMPLOYERS SECTION BELOW)	
PREVIOUS EMPLOYERS		
Employer Name:	Position/Title:	
Employer Address:		
	Dates of Employment:	
	Phone Number:	
Email Address:	Date Request Sent:	
Employer Name:Employer Address:	Position/Title:	
	Dates of Employment:	
	Phone Number:	
Email Address:	Date Request Sent:	
Employer Name:	Position/Title:	
	Dates of Employment:	
Supervisor or Contact Name:		
Email Address:	Date Request Sent:	

Employer Name:	Position/Title:
Employer Address:	
	Dates of Employment:
Supervisor or Contact Name:	Phone Number:
Email Address:	
Employer Name:	Position/Title:
Employer Address:	
	Dates of Employment:
	Phone Number:
Email Address:	
Employer Name:	Position/Title:
Employer Address:	
	Dates of Employment:
	Phone Number:
Email Address:	
Employer Name:	Position/Title:
Employer Address:	
Fax Number:	Dates of Employment:
Supervisor or Contact Name:	Phone Number:
Email Address:	Date Request Sent:
Employer Name:	Position/Title:
Employer Address:	
Fax Number:	Dates of Employment:
Supervisor or Contact Name:	Phone Number:
Email Address:	Date Request Sent:
Employer Name:	Position/Title:
Employer Address:	
	Dates of Employment:
Supervisor or Contact Name:	Phone Number:
Email Address:	Date Request Sent:
Employer Name:	Position/Title:
Employer Address:	
Fax Number:	Dates of Employment:
Supervisor or Contact Name:	Phone Number:
Email Address:	Date Request Sent:
CERTIFICATION	
I hereby certify that this is a true and complete I	isting of all of my previous employers in which I have had contact with
children. I also certify that I have sent a request	for Educational Employer Verification to each of these previous
employers on the date(s) specified above.	
Cinnatura	Data
Signature:	Date: