

VERIFICATION OF NON-TEACHING EXPERIENCE

last name	first name	middle name	maiden name
street address	city	state	zip code
social security number			

▶▶ **To the employer: Please return this form to the employee. Do not send it directly to the Licensure Section.**

Non-Teaching Work Experience (to be completed by employer)				
Employer	Beginning date of service (month, day, year)	Ending date of service (month, day, year)	Total hours worked per week	Position title (Please attach official job description)

I certify that this verification omits leave of absence periods and that all information is complete and correct according to the official records of this business.

signature of employer	date	title	telephone
email address	street address		city, state, and zip code

Form NE: Instructions

To the applicant:

Fill out the personal information at the top of the form. Send a separate Form NE (duplicate as needed) to each former employer where you worked in a non-teaching position that is directly applicable to your area of licensure.

Have your previous employer complete the employment information, sign and date the form, and *return it to you*. All requested information must be provided. Please note that beginning and ending dates must include month, day, and year, and that employers must indicate total hours worked per week. They must also provide their signature, title, organization name, address, and telephone number, and *attach a signed and dated official job description*.

DO NOT SEND THIS FORM TO THE LICENSURE SECTION

Send this form and job description to the personnel administrator in your employing North Carolina school system, along with the \$55.00 processing fee (personal check, money order, or certified check made payable to the Department of Public Instruction) or Form CC (if payment is being made by Visa or MasterCard).

Payment refused for checks or credit cards will result in nullifying licensure actions.

Your personnel administrator will determine the amount of credit to be recommended for the experience and submit appropriate documentation and your fee to the Licensure Section.

Please do not fold, staple, or use paper clips to organize these materials. Doing so will slow down the automated application process and delay your response. Please mail the documents in a 9" x 12" envelope. Thank you.