

## Occupational (Non-Teaching) Experience Verification Form

To obtain a CTE endorsement/credential, you must provide verified, successful and relevant occupational (non-teaching) experience in your related skill area. Self-employment must be documented with copies of tax records, letters from customers, or W-2 forms, etc.

Important: Please refer to our website at: <a href="http://www.cde.state.co.us/cdeprof/cte.htm">http://www.cde.state.co.us/cdeprof/cte.htm</a> for specific occupational experience requirements and coursework for each endorsement/credential area.

Please duplicate this form for multiple employer use as needed. Note: This form is not valid unless all of the following areas have been completed.

## This section must be completed by the Applicant:

Name		Telephone Number	
Address:			
Street	City	State	Zip Code
Endorsement area:		(Required)	
I authorize my present or former employer to f	urnish the following information:		
Applicant's Signature		Date	
This section must be completed by the employ	yer (or by applicant if self-employe	ed):	
The above named person was employed from _	to (Month/Year) (Month/Year)	ear)	
This employment was Full Time Part-time	Total hours employed	(1 year full-time = 2,	000 hours)
He/she was employed as a			
Description of duties:	Job Title		
Business Name:			
Mailing Address:			
Phone:	Email:		
Signature:			

Employer: Please return this form (with original signature) to the above applicant after completion.