COACH OR GROUP SPONSOR EMPLOYMENT VERIFICATION

Employee Must Complete This Section:

Date: _____ **Social Security Number: _____**

TO: **School District/School Name: _____**

Mailing Address: _____

City:_____ State _____ ZIP _____

I have been requested to furnish official verification of my employment experience while employed in your school district as _____(Coach or Group Sponsor)

My present name is: _____

My name while employed: _____

Dates of employment: _____

- - - - - - - - - - - - -

PREVIOUS EMPLOYER MUST COMPLETE THIS LOWER SECTION:

FROM: **School District: _____**

Address: _____

City: _____ State: _____ ZIP _____

Phone Number: _____

This is to certify that _____ was employed as a *Coach or Group Sponsor* by our School District during the following dates:

Dates:_____ _____
(school years) (Position Held)

Dates:_____ _____
(school years) (Position Held)

Signature: _____

Title: _____

Date: _____

Please return to one of the following schools (one circled):

Saratoga Middle/High School PO Box 1710 Saratoga, WY 82331 307-326-5246	Encampment School PO Box 277 Encampment, WY 82325 307-327-5442	HEM Jr/Sr High School PO Box 810 Hanna, WY 82327 307-325-6545

Revised: 7/2008