

### TEACHING EXPERIENCE VERIFICATION

This will certify that \_\_\_\_\_, OCT# \_\_\_\_\_,  
*Name of Teacher*

taught in \_\_\_\_\_ for the periods indicated below:  
*Name of School Board OR Private School*

**PRIVATE SCHOOLS ONLY:** Inspected by the Ministry of Education? (circle one) Y/ N

**PLEASE NOTE:** All supply days must be separated by school year

TYPE OF ASSIGNMENT (Supply, LTO, Permanent)	Start Date YY/MM/DD	End Date YY/MM/DD	% of Time (FTE)	No. of Days (If supply)
LEAVE OF ABSENCE (Maternity/Parental, Unpaid)	Start Date YY/MM/DD	End Date YY/MM/DD	% of Time (FTE)	

I, \_\_\_\_\_, certify that I have completed the above form and the information provided is  
*Name of Representative*  
accurate according the records of \_\_\_\_\_  
*Name of School Board OR Private School*

\_\_\_\_\_  
*Complete School Address*

**FORM MUST BE COMPLETED, SIGNED AND SUBMITTED BY SCHOOL ADMINISTRATOR OR HR REPRESENTATIVE FOR VERIFICATION PURPOSES**

\_\_\_\_\_  
Name of Representative – Written

\_\_\_\_\_  
Representative - Signature

\_\_\_\_\_  
Position

\_\_\_\_\_  
Email address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Date

**DDSB Occasional/Permanent Teacher:** Providing the Durham District School Board with false information, including that which is provided above, could result in disciplinary action up to, and including, termination of your employment.

