

VERIFICATION OF EXPERIENCE

DISTRICT INFORMATION	<u>Mary Jane Smith</u> <small>Superintendent</small>	<u>CUSD # 0001</u> <small>School District</small>
	<u>123 Any Street, Anytown, IL 00000</u> <small>District Address (Street, City, State, Zip)</small>	
	<u>000-000-0000</u> <small>District Phone (Please include area code)</small>	<u>000-000-0000</u> <small>District Fax (Please include area code)</small>

STUDENT INFORMATION	<u>John Henry Doe</u> <small>(First, Middle, Last Name)</small>	<u>012-34-5678</u> <small>Student Social Security Number</small>
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TYPE OF APPLICATION	<input type="checkbox"/> General Administrative Certificate (Type 75)	<input checked="" type="checkbox"/> Superintendent's Endorsement
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EXPERIENCE VERIFICATION	This is to verify that the individual listed above has completed <u>3</u> years of full-time experience in our school district. This individual has been employed in a certified position as: (check all that apply)	
	<input type="checkbox"/> Full-time teacher	<input type="checkbox"/> Number of years
	<input type="checkbox"/> Full-time School Service Personnel (check all that apply)	
	<input type="checkbox"/> Counselor	<input type="checkbox"/> Number of years
<input type="checkbox"/> Psychologist	<input type="checkbox"/> Number of years	
<input type="checkbox"/> Social Worker	<input type="checkbox"/> Number of years	
<input type="checkbox"/> Nurse	<input type="checkbox"/> Number of years	
<input type="checkbox"/> Media Professional	<input type="checkbox"/> Number of years	
<input checked="" type="checkbox"/> Full-time Administrator in possession of a Type 75 Certificate	<input type="checkbox"/> <u>3</u> Number of years	

SUPERINTENDENT SIGNATURE	<u>Mary Jane Smith</u> <small>Signature of Superintendent</small>	<u>01-28-2010</u> <small>Date</small>
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MAIL FORM TO	Dr. John Dively, Department Chair, Department of Educational Leadership, Eastern Illinois University, 2320 Buzzard Hall, 600 Lincoln Avenue, Charleston, IL 61920
	For Questions or Information, please call 217-581-2919

This is an example of a Superintendent's Endorsement