

THE SCHOOL BOARD OF SARASOTA COUNTY
HUMAN RESOURCES DEPARTMENT
1960 Landings Blvd., Sarasota, FL 34231
Phone (941) 927-9000 Fax (941) 927-4087

EMPLOYMENT VERIFICATION

Instruction: Section 1 to be completed by employee. Section 2 to be completed by previous employer.

The individual identified in Section 1 has been employed by The School Board of Sarasota County, Florida in the position of _____. Board policy allows newly hired employees to receive experience/salary credit based upon employment verification. Please complete Section 2 below.

Respectfully,

Roy Sprinkle, Director
Human Resources & Labor Relations

Section 1 – To Be Completed by Employee

(Please print or type all information.)

Employee Name _____ SS# _____

Other Names Used _____

Previous Employer's Name _____

Street Address _____

City _____ State _____ Zip _____

I hereby authorize the release of information from my payroll/personnel records to the School Board of Sarasota County, Florida.

Employee's Signature

Date

Section 2 – To Be Completed by Previous Employer

Position(s) Held: _____ Hours Worked
per Week: _____

Duties (or please attach a job description): _____

Date of Hire: _____ Date of Termination: _____ Full-Time or Part-Time:

Was this employee ever disciplined? ___yes ___no Was this employee ever terminated? ___yes ___no

Signature of Authorized Person: _____ Date _____

Telephone Number: _____

Title: _____

The School Board of Sarasota County, Florida complies with State Statutes on Veterans' Preference and Federal Statutes on non-discrimination on the basis of race, color, sex, religion, national origin, age, handicap, disabilities, marital status or sexual orientation