

THE SCHOOL BOARD OF SARASOTA COUNTY, FLORIDA  
HUMAN RESOURCES

1960 LANDINGS BOULEVARD, SARASOTA, FL 34231  
PHONE (941) 927-9000 FAX (941) 927-4087

**NON-INSTRUCTIONAL EMPLOYMENT VERIFICATION**

**SECTION 1**

Section 1 is completed by the employee and returned to the Salary Specialist for their cost center.

Employee Name (Print) \_\_\_\_\_ DOB \_\_\_\_\_

Other Name Used \_\_\_\_\_

Previous Employer Name (Print) \_\_\_\_\_

Street \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Fax No. \_\_\_\_\_ Email Address \_\_\_\_\_

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

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

**SECTION 2**

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. Section 2 is completed by the previous employer and faxed to Human Resources.

Position Held \_\_\_\_\_ Hours worked per week \_\_\_\_\_

Duties (or attach a job description) \_\_\_\_\_

Hire Date \_\_\_\_\_ Separation Date \_\_\_\_\_  Full-time  Part-time

Was this employee ever disciplined?  Yes  No Was this employee ever terminated?  Yes  No

\_\_\_\_\_  
Authorized Person Name (Print)

\_\_\_\_\_  
Authorized Person Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorized Person Title

\_\_\_\_\_  
Phone No.

The School Board of Sarasota County, Florida complies with Federal and State Statues in prohibiting any form of discrimination and harassment based on an individual's race, color, religion, ethnic or national origin, age, disability, veteran or military status, marital status, pregnancy, sex, gender, gender identity or expression, or sexual orientation.