

Fremont Union High School District

Human Resources

589 W Fremont Ave
Sunnyvale, CA 94087
(408) 522-2227 (408) 245-8548 Fax



Verification of out of District Teaching Experience

To be completed by Employee:

Name: _____ SSN#: _____

Previous Employer: _____

Years of Service: _____ to _____ Percent Employed: _____

To be completed by Previous Employer:

School Year		Name of School/ District	Position	Contract Days in Year	Actual Days of Service	FT or % PT
From	To					

For California Districts Only:

Total Sick Leave transferred in to your district ... _____

Total Sick Leave earned in your district _____

Minus Sick Leave used..... _____

Total Sick Leave available for transfer (in hours) .. _____

Verified by:

Print Name

Job Title

Signature

Date