Verification of Accreditation for Salary Increment Purposes



Educator Information				
Last Name	First Name		Initial	
TEA ID Number				
Employment Information				
One of our employees has indicated previous employment with your institution. The information requested is needed to determine whether the experience may be claimed for salary increment purposes. To assist us in our evaluation, the following information is requested.				
Previous Employment From	Previous	vious Employment To		
Institution Information				
Name of Institution				
 Was this institution during the school years indicated above operated by or under the Yes □ jurisdiction of a governmental unit in the state in which this institution is located? No □ 				
If Yes, please provide the name of the governmental unit				
 Was this institution, during the school years indicated above, accredited by Yes□ a United States accrediting agency recognized by the U.S. Department of Education No□ or by the state or national government in which this school is located? 				
If Yes, please provide the name of the accrediting agency and/or governmental unit				
3. Is this a public or private school? Public□ Private□				
 If the school is operated on the British system please indicate government or public school. Government □ Public □ 				
Signature of authorized official		Title and Name of Aut	horized Official (print)	

Stamp/Seal

The organization's official stamp must be included on the form if service from outside of the United States is reported. For public schools the country's Department of Education is the organization official stamp