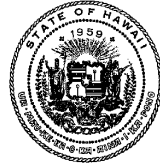


HTSB Form EX1000

Hawai'i Teacher Standards Board
650 Iwilei Road, Suite 268
Honolulu, HI 96817



htsb@hawaii.gov
808-586-2600

VERIFICATION OF EXPERIENCE FOR STANDARD AND ADVANCED LICENSE OR ADDING A FIELD

Directions: 1) Send this verification form to an authorized official of each school or school district where you completed your qualifying satisfactory professional teaching experience. 2) You must sign Section 1, which includes the Disclaimer, before sending to the authorized official. 3) Have the form returned to you and upload to your HTSB account.

1. PERSONAL INFORMATION

HTSB ID from your "My Profile" tab in your online record: _____

Last Name First Name MI

Mailing Address City State Zip

E-mail Address Phone, including Area Code

DISCLAIMER: I hereby authorize the release of the information regarding my professional experience.

Applicant signature: _____ Date: _____

2. VERIFICATION BY AUTHORIZED SCHOOL OR DISTRICT OFFICIAL

To Authorized Official: This individual has applied for a license in the State of Hawaii. Please check or complete the appropriate area(s) to verify contracted P-12 professional teaching experience(s) in your school/school district. Email this form to HTSB at htsb@hawaii.gov

- Check one:
- This applicant has served in the following contracted P-12 position(s) in my school.
- This applicant has not served in contracted P-12 position(s) in my school.

Table with 5 columns: From (mo/yr), To (mo/yr), Subject Taught, Grade level Taught, Check Below if Experience was Full Time

Signature of Authorized School Official (e-sign or signature) Print Name and Title

District/School City State Phone, including Area Code

E-Mail Address Date

Please indicate: _____ Public School _____ Non-Public School If Non-Public School, List Accreditation: _____