



PART II: STATEMENTS OF PROFESSIONAL EXPERIENCE

Check the appropriate box to indicate service under your current Professional Educator Certificate.

- A. I have not served under my current Professional Educator Certificate for a Board of Education.*
- B. I have served under my current Professional Educator Certificate in the following positions for a Connecticut Board of Education.

If you checked “B,” please complete the Grid below:

Employing District	Position Held (e.g., teacher, administrator, social worker, substitute)	Grade Level	Certification Endorsement Required for Position	Check Below if:		Dates of Service	
				Full-Time (50% or more)	Part-Time (less than 50%)	From (Month/Year)	To (Month/Year)

APPLICANT ATTESTATION: I certify that the information provided by me on this application and any accompanying documents contains no material misrepresentations, falsifications or omissions and that all of the information given by me is true, complete and accurate. I understand that all application and accompanying information may be verified and that any material misrepresentation, falsification or omission may result in the denial or revocation of my certificate(s), permit(s) or authorization(s).

ORIGINAL SIGNATURE OF APPLICANT

DATE:

***Board of Education** means a Connecticut local or regional Board of Education, regional educational service center, unified school district, cooperative arrangement established pursuant to 10-158A of the Connecticut General Statutes, the Connecticut Technical High School System, approved private special education facilities, the Gilbert School, Norwich Free Academy or Woodstock Academy.

Original Signatures Must Be On Form Submitted

