WCU
WEST CHESTER
UNIVERSITY

College of Education & Social Work / Professional Education Unit
Employed School Professional's Verification of Employment

Are you a post-baccalaureate (post-bac) or M.Ed. teacher candidate or student ☐ **Yes** ☐ No

Are you currently employed at a school district, private school, charter school, or child care center? ☐ **Yes** ☐ No

Are you a teacher or a para educator? ☐ **Yes** ☐ No

Are you able to complete all field work for the semester at your place of employment? (Field work includes any assignments that involve working with minors.) ☐ **Yes** ☐ No

You cannot use this form if you have any NO responses.

You must provide the clearances your place of employment has on file. The clearances do not have to be dated within the past year

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To be completed by the Employed School Professional/West Chester University teacher candidate.

I verify that I will be completing any and all field work for _____
                                                                                    Program

at _____ for the _____ .
    Employment   *Program Year*

I understand that it is my responsibility to inform the Office of Candidate Services immediately if I am no longer able to complete any field work at my place of employment. In the event I cannot complete my field work at my place of employment, I understand that I must obtain three background clearances and a TB test to continue in the class.

_____   _____
    Signature of teacher candidate/student: *printed name*

_____   _____   _____
    Date   *WCU ID #*   *Cell #*

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To be completed by a Human Resources representative or administrator.

I verify that _____ is currently employed as a _____
                    West Chester University student   *position*

at _____ .
    employment

and that he/she/they/them has the following clearances on file which meet our requirements for clearances.

Please check if required by employment. If not required by your school or child care center, please put N/A beside it.

- ☐ 1. Pennsylvania State Police Criminal Background Check
- ☐ 2. Pennsylvania Child Abuse History Clearance
- ☐ 3. FBI Fingerprinting Clearance
- ☐ 4. Tuberculosis (TB) Testing

_____   _____
    Signature   *Name (please print)*

_____   _____
    Position Title   *Date*