TEACHER SERVICE RECORD

FOR VERIFICATION OF SERVICE OUTSIDE MILLCREEK PUBLIC SCHOOLS

NAME _____
last first M.I.

SOCIAL SECURITY NO. _____

Signature of Teacher _____

NOTE: List only those years served under a Temporary Professional Contract or a Professional Contract.

Do not give credit for long-term substitute teaching, day-to-day substitute teaching, or student teaching.

USE A SEPARATE LINE FOR EACH SCHOOL YEAR. This is a legal document: erasures, ditto marks, liquid paper corrections and stamped signatures are not acceptable.

(1) School Year	(2) State	(3) County	(4) School District	(5) Grade Level	(6) % of Day Employed	(7) No. Days Employed	(8) Beginning work date	(8) Ending Work Date	(9)* Rating	(10) Signature of Supt. or Authorized Administrator

*S = Satisfactory
U = Unsatisfactory

Please return the completed form to:

Millcreek Township School District
3740 West 26th St.
Erie, PA 16506