



**CORONA-NORCO UNIFIED SCHOOL DISTRICT
INDUCTION PROGRAM**

**Administrative Services Clear Induction Program
VERIFICATION OF EMPLOYMENT AND EXPERIENCE**

This is to certify that: _____

(Name of candidate)

First

Middle

Last

has satisfactorily served from _____

(Month/Year)

(Month/Year)

In the position of *(check one):*

Teacher

Administrator

Education Specialist

Counselor

Resource Specialist

Other (specify): _____

In the following grade or level: _____

In the area or subject of: _____

Full-time

Part-time (specify): _____ **hours/day** _____ **days/week**

Day-today Substitute

School/Agency: _____

Address: _____

Telephone Number: _____

Verified by: _____

(Signature)

Name: _____

Title: _____

Date: _____