

VERIFICATION OF POSTSECONDARY EDUCATOR EXPERIENCE

last name	first name	middle name	maiden name
street address		city	state
			zip code
social security number			

►► To the employer: Please return this form to the employee. Do not send it directly to the Licensure Section.

Professional Educator (Postsecondary) Experience (to be completed by employer)				
Name of Institution	Beginning date of quarter/semester (month, day, year)	Ending date of quarter/semester (month, day, year)	Total hours spent teaching per week each term	Position title
(PLEASE USE A SEPARATE LINE FOR EACH QUARTER/SEMESTER TAUGHT)				

I certify that this verification omits leave of absence periods and that all information is complete and correct according to the official records of the institution.

signature of institution's personnel officer

date

address

title

telephone

city, state, and zip code

Postsecondary Educator Experience Credit: How to Apply

- ▶ **Postsecondary educator experience is defined as teaching in an institution of higher education such as:** community college, technical institute/college, junior college, senior college, or university.
- ▶ **For experience as a professional educator at the postsecondary level:**
Have Form CE (Verification of Postsecondary Experience) completed by your former employer. (If you are submitting experience from more than one employer, have each one fill out a separate form. Duplicate Form CE as needed.) Please note that a minimum of one-half time or more (six class hours taught per week) is required to qualify for experience credit. Full-time experience credit requires a minimum of twelve class hours taught per week.

All requested information must be supplied. Beginning and ending dates for each term taught must include month, day, and year. Total class hours **taught per week** must be specified. Employers must provide their signature, title, address and telephone number.

- ▶ Mail the completed form along with a \$55.00 evaluation fee to the

North Carolina Department of Public Instruction
Licensure Section
6365 Mail Service Center
Raleigh, North Carolina 27699-6365

You may pay by personal check, money order, or certified check (made payable to the Department of Public Instruction) or by Visa or MasterCard. To pay by credit card, fill out the credit card payment form.

Please do not fold, staple, or use paper clips to organize these materials. Doing so will slow down the automated application process and delay your response. Please mail the documents in a 9" x 12" envelope. Thank you.