## **Educator Information – To be completed by the educator Enter your information as it appears in your TEA Educator account (ECOS)**

Last name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Initial\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_ Zip code\_\_\_\_\_\_\_\_

**Experience Information – To be completed by Human Resources staff from the employing school district  
(do not include service for future dates)**Name and location of school\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Country\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## **Indicate type of school, please select option 1 or 2, not both**

1. Public\_\_\_\_\_\_\_\_\_ Private \_\_\_\_\_\_\_\_ 2. **British System Only:** Government\_\_\_\_\_ Public ­­­­\_\_\_\_\_\_\_\_\_

**Classroom Teaching Experience**

I confirm that the educator has **completed** at least 1 year (180 days) of full-time wage-earning classroom teaching experience, or 2 years of experience of at least 50% of the day.

Year service began\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year service ended\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If service is for less than 1 year, please indicate the **completed** number of days\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## **Administrative Experience: Assistant Principal, Principal, or Superintendent experience only (do not include assistant superintendent experience)**

I confirm that the educator has **completed** at least 2 years (180 days per year) of full-time wage-earning experience, or 4 years of experience in the field or fields indicated below.

Assistant Principal or Principal experience Superintendent experience(do not include assistant superintendent experience)

Year service began\_\_\_\_\_\_\_\_\_\_\_\_\_ Year service began\_\_\_\_\_\_\_\_\_\_\_\_\_

Year service ended\_\_\_\_\_\_\_\_\_\_\_\_\_ Year service ended\_\_\_\_\_\_\_\_\_\_\_\_\_

If service is for less than 2 years, please indicate the completed number of total days for each year, below.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## **Student Services Experience: School Counselor, School Librarian, Educational Diagnostician, Reading Specialist**

I confirm that the educator has **completed** at least 2 years (180 days per year) of full-time wage-earning experience, or 4 years of experience in the field or fields indicated below.

School Counselor experience School Librarian experience

Year service began\_\_\_\_\_\_\_\_\_\_\_\_\_ Year service began\_\_\_\_\_\_\_\_\_\_\_\_\_

Year service ended\_\_\_\_\_\_\_\_\_\_\_\_\_ Year service ended\_\_\_\_\_\_\_\_\_\_\_\_\_

Educational Diagnostician experience Reading Specialist experience

Year service began\_\_\_\_\_\_\_\_\_\_\_\_\_ Year service began\_\_\_\_\_\_\_\_\_\_\_\_\_

Year service ended\_\_\_\_\_\_\_\_\_\_\_\_\_ Year service ended\_\_\_\_\_\_\_\_\_\_\_\_\_

If service is for less than 2 years, please indicate the completed number of total days for each year, below.

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**Print title and name of authorized** **Signature of authorized Human**

**Human Resources official (required) Resources official (required)**

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Stamp/Seal

The organization’s official stamp must be included on the form if service from outside of the United States is reported. For public schools the country's Department of Education is the organization official stamp.**Please do not return this form to the educator. TEA will not accept forms directly from the educator.**

Please email to: [OSC75@tea.texas.gov](mailto:OSC75@tea.texas.gov?subject=Verification%20of%20accreditation%20for%20test%20exemption), or mail to: **Texas Education Agency**

(If verification is from another country, this form **1701 North Congress Ave**  
will only be accepted by mail.) **WBT 5-100**  **Austin, TX 78701**