



VERIFICATION OF EXPERIENCE



I, _____ am applying for a position in an Early Care and Education or School-Age Center in Delaware.
Printed name of Applicant

Delacare: Regulations for Early Care and Education and School-Age Centers defines “experience” as the practical knowledge or skill gained from documented direct participation in working with children birth through second grade in a group setting for early care and education positions or with children kindergarten through sixth grade in a group setting for school-age positions. Please complete this form and return it to me at:

Applicant Address: _____

Signature of Applicant/Employee Date

TO BE COMPLETED BY EMPLOYER RECEIVING THIS REQUEST

1. Complete name of Employer/Business _____
Address: _____

City State Phone No.

2. Dates of service for employee: From: _____ To: _____

3. Position/Title of employee (i.e. teacher, assistant teacher, program coordinator)

4. Brief description of job duties: _____

5. Number of hours worked in a typical day: ____ A typical week ____ Months worked per year ____

6. *Applying for Early Childhood Qualifications:* Number of hours worked **directly with children birth through second grade (0-8 years) in a group setting** in a typical day: ____

7. *Applying for applying for School Age Qualifications:* Number of hours worked **directly with children kindergarten through sixth grade (5-12 years) in a group setting** in a typical day: ____
What are the ages served: ____

I hereby swear/affirm that the information provided above is a full and complete disclosure of the facts required, and that the information is true and correct to the best of my knowledge and belief.

Printed name/title of person completing this form (can NOT be applicant)

Signature Date