



## School District of Philadelphia

440 N. Broad Street, Suite 177

Philadelphia, PA 19130

Phone: 215- 400-4600 #7

Fax: 215-400-4781

# Employee Records

## Employment Verification and Records Request Form

### Employee Information- Please print *legibly!*

Current Employee?:  Yes  No

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
Employee ID Number

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Position

**Type of Request** – Be specific, what do you want and why. Use comment section to provide more details.  
If you also need a form completed, please attach.

#### **Employment Verification:**

- Verification
- No Earnings for Jul/Aug letter
- Child Care/CCIS
- Immigration
- Tenure
- Prior Experience\* \*If you worked prior to 2000, list years: \_\_\_\_\_
- Buy Back Time\* \*Also provide maiden name if applicable: \_\_\_\_\_
- Social Security/Disability/Insurance Date of Injury: \_\_\_\_\_
- Accident Date of Injury: \_\_\_\_\_

#### **Personnel File:**

- Entire file - Current Employees (permitted one per year)  
- Prior Employees 7.50 money order
- Documents since last request Date: \_\_\_\_\_
- Specific Document(s) Only
  - Certification/Transcript
  - FBI Check
  - Criminal Check
  - Child Abuse Check
  - Unsatisfactory
  - Other \_\_\_\_\_

Addition Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **How do you want to get the document back?:**

We will mail it to the address indicated above unless otherwise specified below.

- Fax to: \_\_\_\_\_ Attention: \_\_\_\_\_
- Send to an Agency/Organization indicated on attached form, or address provided below:

Agency/Name: \_\_\_\_\_ Attention: \_\_\_\_\_

Street Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### **Authorization:** We cannot process without your signature.

I hereby authorize the School District of Philadelphia to release, to the agency or person identified above, any information regarding my position, salary, and length of employment(start/end date) as indicated above.

**Employee Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_