Paraeducator Experience Verification Form

Candidate Name:

Instructions: List each school or program where you worked as a paraeducator. Complete all fields and have this form signed by a supervisor from one of your listed positions.

School Name	**District**	**Grade Level(s) Worked With**	**Student Population** *(e.g., small group pull-out, inclusion in general ed, mild/moderate disabilities, behavioral support, 1:1 aide, etc.)*	**Dates of Employment**

Note to Supervisor: By signing below, you are confirming only the experience that occurred under your direct supervision. You are not verifying any roles listed above that you did not personally oversee.

Supervisor Verification:

Name:

Title/Position:

School/District:

Phone or Email:
Signature: _____

Date: _____