



**SOUTH CAROLINA
STATE DEPARTMENT
OF EDUCATION**

Experience Verification Form

Office of Educator Services
8301 Parklane Road
Columbia, SC 29223
(803) 896-0368 | Fax
(803) 896-0325 | Call Center
certification@ed.sc.gov | Email

The following must be completed by the Educator.

For information on experience credit, please refer to State Board Regulation 43-57.2 and the Guidelines for Granting Experience Credit.

Last Name: _____ First Name: _____ MI: _____ Former Name: _____
Last Four Digits of Social Security Number: _____ SC Certificate ID (if available): _____
Address: _____ Phone: _____

The following must be completed by the employer's Human Resources/Payroll Personnel.

Qualifying verifiers must have direct access to detailed personnel employment records, including days worked.

Name of Employing Entity: _____

Type of Entity (**Definitions on Page 2**):
 Public School/District Institution of Higher Education (IHE)
 Private School Education Regulatory Entity Industry
 Service Provider or Non-Education Based

School Accreditation (If Applicable): Regionally Accredited State Education Agency Accredited
 Other Accreditation: _____

Please provide a detailed record, including time worked each school year (**instructions available on page 2**):

Begin Date of Service (MM/DD/YY)	End Date of Service (MM/DD/YY)	Days Worked Per School Year (August - July)	Hours Worked Per Day	Certification Required (Y/N)	IHE Semester Hours Taught (In addition to days worked as an administrator)	Position Title, Subject Taught, and Ages or Grades Served (If the educator provided virtual instruction, please include the state in which the educator was required to hold certification)

HR/Payroll Personnel Signature: _____ Date: _____

Printed Name: _____ Title: _____

Email Address: _____

Address: _____ Phone: _____

Employer Website Address: _____

Please affix a seal, stamp, or business card if available.



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Entity Type Definitions

Public School/District: a publicly funded school or school district operated at the approval of a regulating state or federal government agency or organization.

Private School: a privately funded school serving any age range of students. The employer must provide a curriculum to students in order to be considered a school.

Institution of Higher Education (IHE): a college, university, or other education entity that offers coursework to adult populations beyond the high school/secondary school setting.

Education Regulatory Entity: a state, federal, or private entity that administrates or regulates educators or schools. Examples include departments of education, school boards, and school-accrediting bodies.

Service Provider: an entity that provides support services to schools or districts. Examples include substitute teaching companies, special education providers, counseling services, and education-based companies that provide consultative, administrative, or training services.

Industry or Non-Education Based: an employer that does not focus on providing education-based resources or services. Examples include trainers in private companies or industry experience related to an educator's career and technology work-based certification field.

Instructions for Reporting Experience Credit

- A school year is from the fall semester to summer semester (August to July).
- School years in which the educator completed the same number of days and hours worked in a given position may be combined into a single line entry.
- Separate line entries should be given for partial school years worked or changes in employment positions.
- If reporting experience credit completed through an IHE, list days worked as an administrative or support personnel separately from semester hours taught. Semester hours taught will be converted and added to total experience credit.

Verification Form Guidelines

- If a given employment position or setting does not clearly meet experience credit guidelines for acceptable teaching positions, a job description may be requested from the employer.
- If a seal, stamp, or business card is not included with this form, the employer may be contacted by phone or email to verify authenticity of reported experience.
- Incorrect or incomplete forms will not be processed by the Office of Educator Services.
- Any documents submitted in lieu of this South Carolina experience verification form must include the specific information requested on this form. If additional space is needed to list all the educator's employment information on this form, verifiers may complete multiple copies of this form or attach a letter/chart listing additional experience entries. If providing documentation with multiple pages, please ensure all pages bear the verifier's signature.
- Please return completed forms to the Office of Educator Services.