ALLIANCE TEACHER REFI LOAN PROGRAM EMPLOYMENT CERTIFICATION FORM

The purpose of this Employment Certification Form is to certify that an applicant for a CHESLA Alliance Teacher Refi Loan is employed as an Alliance District Teacher. An Alliance District Teacher is a teacher, with current Connecticut Educator Certification, who is employed by an Alliance District1 public school.

Instructions:

1. Applicant completes, signs and dates Section A of the Employment Certification Form.
2. Applicant then submits the Employment Certification Form to the Human Resources/Talent Office of the Alliance District identified in Section A of the form, for completion of Section B of the form.
3. The Human Resources/Talent Office returns the form to the Applicant.
4. Applicant uploads the fully completed Employment Certification Form on the Campus Door website with their application for an Alliance Teacher Refi Loan.

Applicant must complete Section A

Section A. Applicant Information

Name (last, middle, first): __________________________________________________

Mailing Address: _________________________________________________________

City: _______________________ State: _________ Zip Code: ___________________

Email: _________________________________________________________________

Phone Number: __________________________________________________________

Alliance District where you are employed: __________________________________

Public school where you teach: _____________________________________________

Connecticut Educator Identification Number: ________________________________

1 “Alliance District” has the meaning ascribed in Connecticut General Statutes §10-262u (1).
I have a current Connecticut Educator Certification: YES

NO

By signing below:

1. You certify that the information provided in Section A of this Employment Certification Form is true to the best of your knowledge and is submitted under penalty of false statement as provided in Conn. Gen. Stat. § 53a-157b; and

2. If you are issued an Alliance Teacher Refi Loan (“Loan”), you authorize the Connecticut Higher Education Supplemental Loan Authority (“CHESLA”) to disclose (i) that you have such a Loan, (ii) your name and (iii) Connecticut Educator Identification Number to the Human Resources/Talent Office (“HR Office”) of the Alliance District you identified in Section A of this form, for purposes of obtaining verification of your employment status, as an Alliance District Teacher, from the HR Office. You further authorize the HR Office to disclose your employment status, including the dates of employment or separation from employment and whether you have been employed by another Alliance District.

_____________________________________  ______________________
Applicant Signature    Date

The Alliance District Human Resources/Talent Office must complete Section B

Section B. Employment Certification

I, (Name)_____________________________, (Title)__________________________, of the Human Resources/Talent Office for the (City/Town) _____________________ Alliance District, certify that:

1. The Applicant named in Section A of this form, is currently employed as an Alliance District Teacher by the (City/Town)__________________________ Alliance District;

2. The Applicant has current Connecticut Educator Certification; and

3. The Applicant teaches at (Name of School)________________________________.

_____________________________________  ______________________
Signature                  Date
If the above certification is completed by other than the Director/Manager of the HR Office, the Director/Manager must review and approve the certification.

Reviewed and approved by:

Name: ________________________________

Title: _________________________________

Signature: ____________________________