## **SC TEACHING FELLOWS Application Verification Form**

Check here if your address has changed.
Year entering program:

This form must be completed and submitted with the Special Request form when asking for deferment due to difficulty securing a position in a public school.

Contact / Basic Information						
Last Name: First Na		ame: Middle Name:		Social S	Social Security Number:	
Name of December (16 different forms of access)	-					
Name on Records (if different from above):						
Street Address:						
City:		State: Zip:		Email:		
Home Phone: Employment Application on file with C			A: No		Date Online Application Submitted:	
Received SC Certification: Yes No	Date Received:		Areas Certified In:			
Application Information						
Please list the names of	of the districts	you have applied	with. Provide dates	of interviews an	d positions applied for.	
Name of District		Positions	s Applied For		Interview Date	
Declaration of Teaching Fellow						
I declare that the information shown above is true and accurate. I further declare that I will notify CERRA immediately upon any change in my status.						
Signature of Borrower: Date:						