

Verification of Employment Form

December 2015

There is no cost to apply to the Registry for Career Ladder placement and/or to renew on time. However, a \$25 fee is imposed on renewal forms submitted 30 or more days after the expiration date listed on your Certificate of Achievement. If you have worked in a license-exempt program (i.e. not subject to Child Care Licensing regulations) for two or more years, you may be eligible to request a fee waiver. To initiate the process, please complete and submit this form in its entirety. Fee waiver requests will be considered **only** when all 3 of the following criteria are met:

1. The individual's membership has been expired for more than 2 years;
2. The length of time since the individual worked in a licensed child care program is greater than 2 years, AND;
3. The individual has submitted a complete Verification of Employment Form AND previous experience has been verified by Registry staff. (Incomplete forms will not be accepted.)

Personal Information

Full Name

Registry ID #

____/____/____ (mm/dd/yyyy)

Date of Birth (required for verification purposes)

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Contact Phone Number

Employment Verification Information

In order to verify your license-exempt employment, you must provide the name of a previous or current supervisor/administrator who will be able to verify that your end date (for previous employment) or start date (for current employment) is **greater than 2 years prior to the current date**. If providing the name of a current employer, that individual must also be able to verify that the program is license-exempt/not subject to child care licensing regulations for mandatory participation. Upon receipt of this form, a Registry staff member will make one attempt to contact the individual you have listed at the phone number provided. If we are unable to speak with the individual, a message will be left either by phone or email. If the person does not respond within 3 business days of the Registry's initial contact and/or the number you have provided is not valid, a fee waiver will not be granted. At that point, you will be notified that the late renewal fee must be submitted in order to renew your membership with The Nevada Registry.

Check One:

- This is a previous employer. This is my current employer.

Business Name

Business Address

Supervisor/Administrator's Name

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Business Phone Number (Personal cell phone #s are not permitted)

For Office Use Only:

Date form received: _____ Complete Incomplete

Eligibility verified Not eligible (does not meet the 2 year requirement)

Date contact initiated: _____ Talked to Individual Left Message

Employment verified? Yes No License-exempt? Yes No Waiver granted? Yes No

Date member notified: _____ Staff initials: _____ Notes: _____

Mail, fax or email this form to:

The Nevada Registry, 240 South Rock Blvd., Ste. #143, Reno, NV 89502

Fax: (775) 857-3158 | Email: nevadaregistry@washoeschools.net

