



Submit Completed Form(s) To:
 NYC Department of Education
 Office of Employment Records Research
 65 Court Street, Level C
 Brooklyn, NY 11201

EMPLOYMENT RECORDS RESEARCH REQUEST FORM

Use this form to request employment verification for pension purposes. Please complete and submit the form – along with any third-party forms – to the address listed above. Completed requests will be mailed to the individual identified below.

SECTION 1: EMPLOYEE INFORMATION			
This section must be completed so that we may access the employee's records.			
Employee's Name (Last, First, Middle Initial):	Maiden Name:	Employee ID/Reference # or EIS/File #:	
Home Address:		Daytime Phone #:	Email Address:
SECTION 2: THIRD-PARTY INFORMATION			
This section should be completed <u>only</u> if a third-party is to receive the verification.			
Third-party Contact Name:	Company or Institution:	Email Address:	
Address:		Phone #:	Fax #:
SECTION 3: EMPLOYMENT RECORDS RESEARCH REQUEST			
Please use the table below to indicate your research needs. Note that the DOE only provides service history for periods when you were <u>not</u> enrolled in the retirement system; your retirement system already possesses your service history for any period in which you were a member. Hence, requests stating "to the present" in the "Dates of Employment" column will not be honored.			
Retirement System Membership Date (<u>must</u> be obtained before submitting your request):			
Service Type (Indicate all that apply)	Dates of Employment From To	Location of Employment (School/Office Address)	District/Borough
Regular Teacher *	–		
Regular Substitute	–		
Per Diem Substitute	–		
Hourly Professional/Per Session **	–		
Hourly School Lunch	–		
Annual School Lunch	–		
Educational Paraprofessional	–		
School Aide/School Safety	–		
Educational Facility Officer	–		
Family Worker	–		
Annual Administrative	–		
Hourly/Day Rate Administrative	–		
Other:	–		
* Regular Teacher service is only verified if you have removed your contributions from your retirement system. ** Hourly Professional/Per Session service is only verified if it is your only source of employment.			
Additional Information/Unique Requests:			
SECTION 4: EMPLOYEE SIGNATURE			
The employee must provide his/her signature, authorizing release of his/her employment information, before this request can be fulfilled.			
I authorize the New York City Department of Education to release my employment information as indicated above.			
Employee's Signature:			Date:

Accessibility Report

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Organization:

Summary

The checker found no problems in this document.

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- Passed manually: 0
- Failed manually: 0
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- Failed: 0