



**VERIFICATION OF EMPLOYMENT
FOR
EMPLOYMENT RELATED REQUEST FOR INTERDISTRICT TRANSFER**

School Year Requested: _____

New Request: _____ **Renewal:** _____

Parent/Guardian: Please complete this section.

STUDENT INFORMATION

Name of Student: _____ **Parent/Guardian:** _____

Name of School Currently Attending: _____ **Current Grade:** _____

District of Residence: _____ **Grade for Year Requested:** _____

Home Address: _____

Phone (Days): _____ **Phone (Evenings):** _____

Employer: Please complete this section.

EMPLOYER INFORMATION

Employee's Name: _____

I hereby acknowledge under penalty of perjury that the above-named employee is working on a regular basis at the following address:

Employer: _____ **Phone:** _____

Address: _____

Employee's Position: _____

of Work Hours Per Week: _____ **# of Work Weeks Per Year:** _____

In the event there are any changes in the above information, I will immediately notify the Dixie School District of such changes. I understand that the employment described above is a bonafide basis for the enrollment of the named student(s) in a school district other than the parents' school district of residence.

Signature of Employer: _____ **Title:** _____

Date: _____

Please attach a copy of a current check stub, business license, or other dated documentation of employment.