

**ALLIANCE EDUCATOR AND COUNSELOR REFI LOAN PROGRAM EMPLOYMENT CERTIFICATION FORM**

The purpose of this Employment Certification Form is to certify that an applicant for a CHESLA Alliance Refi Loan is employed as an Alliance District Teacher, Paraeducator or School Counselor.

**Definitions:**

**“Alliance District”** has the meaning ascribed in Connecticut General Statutes §10-262u (1).

**“Alliance District Paraeducator”** means a paraeducator employed by an Alliance District School.

**“Alliance District Teacher”** means a teacher with current Connecticut Educator Certification who provides direct classroom teaching or classroom-type teaching in a non-classroom setting, for more than 50% of their day and is employed by an Alliance District public school.

**“Alliance Refi Loan”** means a loan that may be issued under CHESLA’s Alliance Educator and Counselor Refi Loan Program.

**“Alliance District School Counselor”** means a school counselor employed by an Alliance District School.

**“CHESLA”** means the Connecticut Higher Education Supplemental Loan Authority.

**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 Refi Loan.

**Applicant must complete Section A Section A. Applicant Information**

Name (last, middle, first): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_ Zip Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am employed as an: (Check One)

1. Alliance District Teacher \_\_\_\_
2. Alliance District Paraeducator \_\_\_\_
3. Alliance District School Counselor \_\_\_\_

Alliance District where you are employed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of public school where you are an Alliance Teacher, Paraeducator or School Counselor : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If a teacher or school counselor, your Connecticut Educator Identification Number: \_\_\_\_\_\_\_\_\_\_\_\_

If a paraeducator, your Employee Number: \_\_\_\_\_\_\_\_\_\_\_\_

If a teacher, 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 Refi Loan (“Loan”), you authorize CHESLA to disclose (i) that you have such a Loan, (ii) your name and (iii) your Connecticut Educator Identification Number or Employee 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, Paraeducator or School Counselor, 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 Director/Manager/Head of the** **Alliance District Human Resources/Talent Office must complete and sign 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

1. Alliance District Teacher
2. Alliance District Paraeducator
3. Alliance District School Counselor

by the (City/Town)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Alliance District.

2. If a teacher, the Applicant has current Connecticut Educator Certification; and

3. The Applicant is an Alliance District Teacher, Paraprofessional or School Counselor at (Name of School)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date