



**STOCKTON UNIFIED SCHOOL DISTRICT**

CURRICULUM • PROFESSIONAL DEVELOPMENT  
 1503 St. Mark's Plaza, Suite B, Stockton, California 95207  
 Phone (209)933-7030 FAX 956-4892

**NEW EMPLOYEE DATA FORM**

Hire Date: \_\_\_\_\_ SSN: \_\_\_\_\_ Employee I.D. #: \_\_\_\_\_ DOB: \_\_\_\_\_

Name: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Personal Email \_\_\_\_\_

**Current Credential Held:**

<input type="checkbox"/> Intern	Date Received	# years teaching
<input type="checkbox"/> Pre- Intern	Date Received	# years teaching
<input type="checkbox"/> PS-Variable Term Waiver (VTW)	Date Received	# years teaching
<input type="checkbox"/> STSP (short-term staff permit)	Date Received	# years teaching
<input type="checkbox"/> Preliminary 2042 OR PRO <input type="checkbox"/>	Date Received	# years teaching
<input type="checkbox"/> Level I Ed. Specialist	Date Received	# years teaching
<input type="checkbox"/> Clear OR Level II Ed. Sp.	Date Received	# years teaching
<input type="checkbox"/> GELAP (limited assignment)	Date Received	# years teaching

Intern Information

I completed an intern program prior to receiving preliminary credential.

Yes  No # years as intern \_\_\_\_\_

Intern Program \_\_\_\_\_

Out of State Credential

Yes  No State: \_\_\_\_\_

# years out of state experience: \_\_\_\_\_

Tests Required to complete Credential

- RICA  CSET  
 CTEL  US Constitution

Student Teaching

- Completed  
 In progress Date of completion: \_\_\_\_\_

Teacher Induction (formerly BTSA)

Participated: Year 1  Year 2

District and Program: \_\_\_\_\_

**Current Assignment:**

School: \_\_\_\_\_

Grade: \_\_\_\_\_

Content Area(s): \_\_\_\_\_

Credential in this content area  Yes  No

Special Education:  yes  no

Authorization(s): \_\_\_\_\_

Signature of Credential Analyst: \_\_\_\_\_ Date: \_\_\_\_\_

I have been informed of my responsibility (if appropriate) to enter a Commission Approved Teacher Induction Program as required by the California Commission on Teacher Credentialing.

Signature of Employee: \_\_\_\_\_ Date: \_\_\_\_\_