

BACKGROUND OF INSTRUCTOR

Wis. Stats. 38.50 (7) (f)
Form EAB 1.04 (Rev.11/15)



STATE OF WISCONSIN
EDUCATIONAL APPROVAL BOARD
431 CHARMANY DRIVE, SUITE 102
MADISON, WI 53719
(608) 266-1996

Wis. Stats. 38.50 (7) (f) requires all private postsecondary schools, not otherwise exempt, to provide the following information, by program, concerning instructors employed by the school. School officials must complete and sign this form and all required attachments and submit the documents to the Educational Approval Board. If the school has not hired its instructors, submit a job description for each instructor that the school will hire.

Notice: All information provided on this form is subject to verification through contact with law enforcement and other government agencies, as well as current and former employers.

I. GENERAL SCHOOL INFORMATION

Name of School:	
Name of Instructor:	Date of Birth:
Date Employed in Present Position:	Name of Program or Subject to be taught:

II. POSTSECONDARY EDUCATION

1. Institution and Location:	Major Field:
Attendance (mo/yr to mo/yr) :	Credential Earned:
2. Institution and Location:	Major Field:
Attendance (mo/yr to mo/yr) :	Credential Earned:
3. Institution and Location:	Major Field:
Attendance (mo/yr to mo/yr) :	Credential Earned:

III. RELEVANT EMPLOYMENT EXPERIENCE

1. Employer and Location:	Position/Duties:	Dates (mo/yr to mo/yr):
2. Employer and Location:	Position/Duties:	Dates (mo/yr to mo/yr):
3. Employer and Location:	Position/Duties:	Dates (mo/yr to mo/yr):

4. Employer and Location:	Position/Duties:	Dates (mo/yr to mo/yr):
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Other Relevant Experience:

IV. LICENSING AND CRIMINAL BACKGROUND

Has the instructor ever been licensed in any state as a teacher? Yes No

If yes, list the state(s), types of licenses, and dates of licensing:

Has the instructor ever had a teacher's license suspended or revoked? If yes, on a separate sheet please provide complete details regarding each suspension or revocation. Yes No

Has the instructor ever been found guilty of, pleaded no contest to or agreed to forfeit bail for any public offense except minor traffic violations? If yes, on a separate sheet please provide complete details regarding each offense including the charge, date of conviction and court of record. Yes No

V. CERTIFICATION

I hereby certify that the information contained on this form and any attachments to the form is true and correct to the best of my knowledge.

Signature of Authorized School Official:

Print or Type Name and Title of Authorized School Official:

Date: