

**WEST MILFORD TOWNSHIP PUBLIC SCHOOLS**  
**46 Highlander Drive**  
**West Milford, NJ 07480**  
**973-697-1700**  
**FAX: 973-697-8351**

TO: PERSONNEL/PAYROLL DEPARTMENT OF

\_\_\_\_\_ SCHOOL DISTRICT

FROM:

RE: VERIFICATION OF CONTINUOUS EMPLOYMENT  
(CRIMINAL HISTORY PROCEDURE)

DATE:

We wish to employ \_\_\_\_\_, Social Security # \_\_\_\_\_ as a substitute. To comply with State Department of Education approval procedures as established by the Criminal History Review Unit, we must confirm that this candidate has been continuously employed with your district, with no break in service. For confirmation, we would appreciate your completion of the lower section of this document. Thank you for your assistance.

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\_\_\_\_\_  
Name of Candidate

\_\_\_\_\_  
Position Held

Period of Employment: From \_\_\_\_\_ to \_\_\_\_\_

I hereby certify the above information is accurate.

\_\_\_\_\_  
(Signature of District Administrator)

\_\_\_\_\_  
Title