## TRENTON EDUCATION ASSOCIATION DUAL CERTIFICATION ELIGIBILITY FORM

Name:			XXX-XX
Name:(Please print) First Name	M.I.	Last Name	Last 4 digits of SSN
Current Assignment:P	osition / Job Titl	(@	School / Building
			-
I hold certification in the follow	ving areas:		
1)			
2)			
CHECK ONE BOX:			
Documentation for <b>both</b> the Human Resources Of	areas of certifica fice.	tion is already on fil	e in my personnel folder in
[ ] Documentation for my or folder in the Human Resonant AND I have attached documentation for my or folder in the Human Resonant III is a second to be a se	ources Office as	presented at my initi	al date of hire;
Signature		Date	
Members: Please DO NOT SE If you are filing cer and get a receipt.	IND ORIGINAL tificate for the fi	certifications to TE rst time, bring origin	OE Human Resources.  all and a copy to HR