**Licensing File** **Cover Page**

Employee’s Name:

Title:

**Required for All Employees:**

* Personnel Record Form LIC 501 or SCUSD Application
* Health Screening Form LIC 503
* Child Abuse Reporting Form LIC 9108
* Criminal Record Statement Form LIC 508
* Employee Rights Form LIC 9052
* Immunization Verification PSL-F273 or immunization records (Tdap/Dtap, MMR)
* Flu Shot: Waived □ or Date administered:
* COVID Shot: Waived □ or Date administered:
* TB Clearance Expiration:

**If Applicable**

* Transcripts
* Credential/Permit Level Expiration:

**Required for Teachers**

* CPR Certificate Expiration:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* First Aid Certificate Expiration:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Licensing Recordkeeping Component II Training
* Health & Safety Training Certification

Notes: