

Work Experience for ELS-CTE

Name: _____

IEIN NO. _____

Name of Employer: _____

State Course ID No. and Name: _____

Area of Experience: _____ hours

- Description:

Area of Experience: _____ hours

- Description:

Area of Experience: _____ hours

- Description:

Area of Experience: _____ hours

- Description:

Area of Experience: _____ hours

- Description:

Area of Experience: _____ hours

- Description:

Area of Experience: _____ hours

- Description:

Area of Experience: _____ hours

- Description:

Area of Experience: _____ hours

- Description:

Area of Experience: _____ hours

- Description:

Area of Experience: _____ hours

- Description:

Area of Experience: _____ hours

- Description:

Total Hours Worked _____ hours

Applicant Signature: _____

Name of Applicant (Printed): _____

Notary