EMPLOYMENT VERIFICATION

Please have your employer complete a verification letter utilizing the format below.

(COMPANY LETTERHEAD)

EMPLOYMENT VERIFICATION

Date:_____

This is to verify the following information on the above mentioned employee of :

_____

1. Dates of employment:_____

2. Position: _____

3. Department:_____

4. Salary:_____

If you have any questions, you can contact us at:_____

_____

Name

_____

Title