



SOUTH CAMPUS

Employer Verification Form (Required for PT Tech/Aide only)

Applicants must complete this form. Please submit form on online application system. Save as PDF.

Applicant's Name:

Organization Name:

Manager/Leader Name and Title:
Manager/Leader Phone number:
Manager/leader Email:

Applicant's Job Title:

Dates of
Employment

From:

To:

Total # Hours per week:

Job Roles and
Responsibilities (*Can
provide separate
documentation*)

Manager/Leader
Signature

Signature:

Date:

Applicant Signature

Signature:

Date:

Additional
Comments