

## **VERIFICATION OF WORK EXPERIENCE**

ROM:			то:	
PLICANT'S NAME			COMPANY NAME	
DRESS			ADDRESS	
TY	STATE	ZIP	CITY	STATE ZIF
	I am applying for approval to t One of the requirements I mu experience.			
	The College has asked me to so of my employment, the total number working for your company. Con would provide the information in	mber of hours work sequently, it would	ked per week, and the major d	uties performed while
			Thank you for your coop	peration.
			SIGNATURE	
	I certify thatto		averaging	s employed from
	per week. His/her major d			were:
	AUTHORIZED SIGNATURE		TITLE	
			DATE	
		Please return to:	: IUNITY COLLEGE	
		DEPARTMENT		
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