

## ***EMPLOYMENT VERIFICATION REQUEST FORM***

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I would like to request that the company provide the following document(s) to confirm my employment status to the specified institution or myself.

**Agency/Company requesting information:**

\_\_\_\_\_

**Type of documentation requested:**

☐ Paycheck Stub Dated: \_\_\_\_\_

☐ Company Specific Form (form must be provided)

☐ State Department Request Form

☐ Other – Specify: \_\_\_\_\_

**Recipient of Requested Information** (if not provided on the form)

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Fax #: \_\_\_\_\_

E-mail: \_\_\_\_\_

*Any request for information must include the employee's signature. If a request is received with no signature indicating that the employee authorized the request, then the form will not, under any circumstances, be completed.*

*All forms regarding a worker's compensation case must be sent to the attention of Human Resources immediately and completion of this form is not necessary.*

\_\_\_\_\_

Employee's Signature

\_\_\_\_\_

Date