

## Employment Verification Request Form

### Personal Information

Last: \_\_\_\_\_ First: \_\_\_\_\_ M: \_\_\_\_\_

DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Last 4 SS#: XX-XX-\_\_\_\_\_

### Employment History

From: \_\_\_\_\_ To: \_\_\_\_\_ Contract Title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Contract Title: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Contract Title: \_\_\_\_\_

Department: \_\_\_\_\_ Include Salary? YES NO

Funds Source: Tax-Levy Non-Tax Levy Research Foundation

### Reason For Request

Pension purposes? YES NO

If yes, which is your pension plan? NYCERS NYC-TRS NYS-TRS Other: \_\_\_\_\_

Other: Mortgage Loan Employment Other

### Contact Information

Email Address: \_\_\_\_\_ Telephone/Office Ext: \_\_\_\_\_

Signature of Employee/Requester: \_\_\_\_\_ Date: \_\_\_\_\_

*By my signature, I hereby consent to the release of the information requested above.*

*\*\*Third party requesters must have a release signed by former or current employee.*

*Please be advised that The City College of New York, Human Resources Office only verifies the **position, salary and dates of employment for current and former employees. Access to personnel files will not be permitted.***

E-mail (listed above) Fax: \_\_\_\_\_ U.S. Mail: \_\_\_\_\_

Special Requests: \_\_\_\_\_

*All verifications will be emailed directly to the Employee unless otherwise specified. Please allow **up to seven (7) business days for processing.***