## **EMPLOYMENT VERIFICATION LETTER**

Employer Name:		
Address: City:	State:	
Zip:		
RE: Verification of E	mployment for	[Name of Employee]
To whom it may con	cern:	
Employee] has been	etter as confirmation that employed with [Employee Start Date	[Employer Name]
of hours per wee Daily □ Weekly □ I	[Name of Emplog and works on a □ Full-1 k while earning \$ Bi-weekly □ Monthly □ Quarter f \$	Fime $\square$ Part-Time basis of $\_\_$ payable $\square$ Hourly $\square$
	stions or require further information	
Sincerely yours,		
Signature	Print Name: _	
Employer Title:		