

EMPLOYMENT VERIFICATION FORM

This form is to verify healthcare employment of the applicant. Additional points will be rewarded to their admission application. Healthcare employment can include any employee role in a healthcare environment such as work experience as physical therapy tech or aide, athletic trainer, medical assistant, massage therapist, or CNA to name a few.

Applicant Name: _____

Dates of employment: _____

Number of hours worked in past year: _____

Title of position held by applicant: _____

Job description/duties:

Name of Facility _____

Address: _____

Supervisor's name: _____

Contact information: (phone or email) _____

Signature of supervisor