



SAN JOSÉ STATE UNIVERSITY
TITLE IV-E PROGRAM



COLLEGE OF APPLIED SCIENCES AND ARTS

EMPLOYMENT VERIFICATION FORM

PART A: Consent For Release of Information (To be completed by Title IV-E graduate)

I (print name), \_\_\_\_\_, give permission for release of information regarding my employment from the time I completed requirements for the MSW in \_\_\_\_\_(month) \_\_\_\_\_(year), through the end of my contractual period regarding employment confirmation, current status and agency position, and length of employment to the Title IV-E office at San Jose State University.

Table with 3 columns: Address: (Street), (City, State), Zip; Home Phone, Cell Phone, Work Phone; Personal Email, Alternate Email, Work Email.

Signature of Graduate

Date

PART B: Employment Verification (To be completed by Personnel/Human Resources)

Form with fields: County/Agency Name, Current Job Title, Date Hired, Still Employed, Has employment been continuous?, Reason, I certify that the above named is employed, Name of Personnel Officer, Title of Personnel Officer, Phone number, Signature of Personnel Officer, Date, Email.

\* Please note Maternity Leave is considered an interruption of service

PART C: Employment Verification (To be completed by Title IV-E Program)

For Nonprofit ONLY: Date position is determined "qualified employment" \_\_\_\_\_

The above information certifies that the above named individual has fulfilled the public service/child welfare employment obligation as of the indicated date.

Title IV-E Coordinator Signature

Date

Title IV-E Coordinator Name (Please print)

Phone Number

Retain a copy and return the original document to Pnina Green, Title IV-E Project Coordinator at: San José State University, SSW, Title IV-E Program, One Washington Square, San Jose, CA 95192-0124