



Office of Human Resources
 Carroll Building
 P: 718.270.6910
 F: 718.270.6909

**Medgar Evers College
 of The City University of New York**
 1650 Bedford Avenue
 Brooklyn, New York 11225

Employment Verification Request Form

This form is to be used as a formal request for an Employment Verification Letter from an employee of Medgar Evers College, regardless of their current employment status. Please submit this form to the following email address VOE@mec.cuny.edu and allow for 3 to 5 business days for completion.

Section A: Required Personal Data (Please print or type)

Name: _____
First Name *Middle Initial* *Last Name*

CUNYfirst EMPLID: _____ Department: _____

Home Phone: (____) ____ - _____ Job Title: _____

Cell Phone: (____) ____ - _____ Email Address: _____

Section B: Information to be Verified

Employment Status with Medgar Evers College of Human Resources:

- Active (Currently Employed)
- Terminated (Not Employed on a Research Foundation Project at the time of this request)

I am requesting an Employment Verification Letter containing the following: *(Check all that apply)*

Position Title	Start Date	End Date	Part-Time/Full-Time Status
Other	Hourly Rate of Pay	Annual Salary	Salary and Service Request

Section C: Delivery Instructions

Send Letter To: *Letters are addressed 'To Whom It May Concern' unless otherwise specified.*

E-Mail *(please provide email address if different from above):* _____

Mail *(please provide address below if different from mailing address on file)*

Hold for Pick-Up *(you will be contacted via the phone number/E-Mail address provided above when the letter is ready)*

Fax: _____ - _____ - _____

Third Party Release/Pick-Up *(please provide the name and/or address below)*

For third part releases: _____

<i>First Name</i>	<i>Last Name</i>			
_____	_____			
<i>Street Address</i>	<i>Apt. Number</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>

Section D: Employee Authorization

I hereby authorize the Medgar Evers College Office of Human Resources to prepare an Employment Verification Letter, which will include the information I have indicated above.

Employee Signature: _____ Date: _____