

Employer Verification Form

Employer: Please complete this form after the student has completed at least 50 hours of work-based experience. You may fill out and sign electronically or print, sign, and scan.

1. Student Name

2. Supervisor Name & Title

3. Host Organization

4. Supervisor Email

5. Supervisor Phone

6. Approximately how many hours has the student worked with your organization?

7. Is the student's performance satisfactory?

Yes

No

8. Supervisor Signature