

Work Verification Letter

Program Name:

Street Address:

Mailing Address:

Date:

Re: Work/volunteer verification for _____

Dear Credentialing Specialist:

This letter serves as verification of employment or volunteer hours, working with children, for _____, who was employed (or volunteered) at _____ from _____ to _____.

_____ worked with school-age children ranging in age from _____ to _____.

The position held was _____.

The average number of hours worked (or volunteered) in a week was _____. The average number of weeks a year was _____.

Exceptions to these hours are indicated below and may contain school and summer vacation periods where more hours are typically worked in a week. Please note that all hours counted are those working with children.

Signature:

Print Name:

Title: