

**EMPLOYER VERIFICATION FORM**

**Place of Employment** \_\_\_\_\_

**Address** \_\_\_\_\_

**Telephone Number** \_\_\_\_\_

**Work Days** \_\_\_\_\_

**Work Hours** \_\_\_\_\_

**I hereby certify that** \_\_\_\_\_

(Name of Employee)

**is employed by** \_\_\_\_\_

(Name of Company)

\_\_\_\_\_  
**Signature of Employer**

\_\_\_\_\_  
**Employer Name (Please Print)**

\_\_\_\_\_  
**Date**

**Student's Name** \_\_\_\_\_

**NOTE: IF EMPLOYMENT STATUS CHANGES DURING THE SCHOOL YEAR,  
IT IS NECESSARY FOR THE PARENT TO FORWARD THE CORRECT  
INFORMATION TO:**

**Student Assignment Office  
Guilford County Schools  
120 Franklin Blvd.  
Greensboro, NC 27401**