

**Company Name**

Company Address Line 1

Company Address Line 2

City, State ZIP

Phone: (XXX) XXX-XXXX

Date: \_\_\_\_\_

To Whom It May Concern,

This letter is to verify the employment of \_\_\_\_\_ at \_\_\_\_\_.

**Employee Name:** \_\_\_\_\_

**Job Title:** \_\_\_\_\_

**Dates of Employment:** \_\_\_\_\_

**Employment Status (Full/Part Time):** \_\_\_\_\_

If you require additional information, please contact us.

Sincerely,

\_\_\_\_\_

Name and Title

Company Name