

Employment Verification Letter Request

To: Employment Services

From (Name): _____ Telephone No: _____

Ref Employment Letter for:

Last Name: _____ First Name: _____ Personnel No (or SSN): _____

Date of Employment: _____

Job Title: _____ Work Location: _____

Please circle **YES** or **NO** if you would like your income information included in this verification letter.

Additional Comments:

Please check one below

I will pick up document, call _____ when ready.
Telephone Number

Email document to _____
Email address

Mail to home address in SAP

Mail to the following address _____

To email this form – send as an attachment to employment_services@browardschools.com

To fax this form – fax to (754) 321-0900

To mail this form – mail to: Employment Services, 7720 W. Oakland Park Blvd., Suite 101A, Sunrise, FL 33351-6704