MOTLOW STATE COMMUNITY COLLEGE

CERTIFICATION OF PERMANENT EMPLOYMENT

This is to certify that	is a pe			manent full-time
	Name of Employee			
employee of this com	npany and has been employeed by us since		Date of Employment	
		Name of Company		_
		Address		_
	City	State	Zip	_
	1	Name of Verifying Official		_
		Position of Official		_
		NOTARY		
State of Tennessee				
County of				
		within named(Employ foregoing instrument. This	/er)	who
20				
		Not	ary Public	>
		My Commission F	xnires	