



Employment Verification Form

Name: _____ State ID Number: _____

Employment Status

- Employed full-time: I certify that I am currently employed full-time.
- Employed part-time: I certify that I am currently employed part-time.

Employer Name: _____

Start Date: _____ Job Title: _____

Salary: _____ Hours Per Week: _____

By signing below, I attest that the information provided on this application is true and accurate to the best of my knowledge.

Signature: _____ Date: _____

Career Advisor: _____ Date: _____

**Career Advisor: Scan into ncworks.gov along with paystub and Closure Request Form*