

**Work Verification Form
for Family and Consumer Sciences Occupations
Requiring Less Than a Bachelor's Degree**

This is to certify that _____ was employed at
(name)

(business name and address)

in the capacity of _____, from _____
(job title) (date)

to _____. The total number of hours employed in this position are
(date)

estimated/recorded at _____ hours, for an average of _____ hours per week.

Responsibilities for this position include:

This position is referenced in the Occupational Information Network's (O*NET)
Standard Occupational Classification (SOC) code system by the code
_____.

_____/_____
(employer's signature) (date)

(position)

Please attach business letterhead, address
stamp, or business card to this form.