

WORK

Employment Verification for a Reduced Course Load

| | |
|--------------------------------------|---|
| _____ Student Name (please print) | _____ Student ID Number |
| _____ Email Address | _____ Phone Number |
| _____ Units you are in | _____ Units you propose to take |
| _____ Employer | |
| _____ Employer Tax ID | |
| _____ Employer Address | |
| _____ Job Description | |
| _____ Hours of work per week | Paid employment? <input type="checkbox"/> Yes <input type="checkbox"/> No |
| _____ Employment begins on | _____ Employment ends on |
| _____ Supervisor's Name (print) | _____ Supervisor's Signature |

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT & MAY BE VERIFIED BY THE COLLEGE.

Student signature

Date

- A signed employment verification form is required each semester for a reduced course load.
- DEADLINE: The last day to submit this form is the add/drop deadline during the 4th week of the semester.
- You will be able to reduce your course load based on the employment according to the guide below:

| Hours of paid employment | Minimum Units Required |
|--------------------------|------------------------|
| 15-19 | 10 |
| 20-29 | 8 |
| 30 hours or more | 6 |

Approved by

Date