

Corporate Partner Employment Verification Form

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| Student name: | Date: |
| Name of company: | |
| Position with company: | |
| Employed from: | Employed to: |
| Currently employed: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Name of HR Representative: | |
| Signature of HR Representative: | |
| E-mail address of HR Representative: | |
| Telephone of HR Representative: | |

Complete and return to:

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