



## Corporate Partner Employment Verification Form

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:**

Jennifer VanBrederode  
Associate Director of Online Financial Planning  
Quinnipiac University Online  
275 Mt. Carmel Ave. | OF-QUO | Hamden, CT 06518  
O: 203-582-8430 | F: 203-582-4512  
[online.finaid@quinnipiac.edu](mailto:online.finaid@quinnipiac.edu)