



# NORTHEAST

## WI Technical College

### Verification of Employment

The Northeast Wisconsin Technical College (NWTC) requires written verification from past and present employers to document occupational experience. This form is intended to provide the official record of this occupational experience. Please complete the top part of this form which authorizes your former/present employer to furnish the information requested at the bottom of the page.

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#### To be Completed by Applicant:

I am applying to the program below and authorize my former/present employer to furnish the following information to NWTC.

Name:  Date of Birth:  NWTC Student ID:

Program of Study:

Student Signature:  Date:

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#### To be Completed by Employer:

**\*\*Please attach a job description of the position the applicant held (if possible)\*\***

Employment Status:  If Part-time, how many hours worked per week?

Start of Employment:  End of Employment:  Job Title:

Employer:  Address:

Authorized Signature:  Date:

Please return form via email:  
**stacey.felton@nwtc.edu**  
or  
mail to:  
**NWTC-Health Sciences**  
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