

Human Resource Services

2900 Bedford Avenue · Brooklyn, NY 11210 TEL 718-951-5137 · FAX 718-951-5370 www.brooklyn.cuny.edu

Request for Employment Verification

Please be advised that in order to protect your personnel record from unauthorized access, Brooklyn College will adhere to a University policy whereby no evaluative or factual information regarding your employment will be released through its authorized designee without your consent, except to CUNY and other non-investigatory governmental agencies, the Human Resources Administration, the Department of Health, Education and Welfare, or upon subpoena. Therefore, if you should wish us to respond to the attached "Reference Request", please sign and return the attached form to the Office of Human Resource Services, Room 1231 Boylan Hall, Monday – Friday 9:00 a.m. – 5:00 p.m. or e-mail to *HRVerifications@brooklyn.cuny.edu*.

Name:						-	
Empl ID #:						_	
Title:						_	
Department:						-	
Dates of Empl	oymen	t:				_	
Supervisor:						_	
Please indicate	e what	information y	ou would	l like include	ed in the l	etter:	
Dates of employment				Dер	artment		
Current Salary				Title			
Hours				Stat	tus		
Other:							
Where would y	ou like	e the verificat	ion sent?				
will p	ick up	Contact #_					
Fax t	o:	Name			Fax #		
Mail	o:	Name					
		Address:					
							release factual is written inquiry.
Signature			-				
Date			-				