

**FACULTY  
VERIFICATION OF EMPLOYMENT**

**This form needs to be completed for faculty/researchers/scholars/scientists/ engineers who are coming to Florida Atlantic University from previous employment.**

**Applicant/Employee Information:**

Name: \_\_\_\_\_  
Last First M. I.

**Employment Verification:**

\_\_\_\_\_ Letter of reference from previous employer is attached.

**OR**

\_\_\_\_\_ Employment was verified on (date) \_\_\_\_\_ by telephone (phone number \_\_\_\_\_ with (title) \_\_\_\_\_ at (institution) \_\_\_\_\_.

**Verified By: (FAU Representative)**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***This form should be sent to the Associate Provost, Academic Personnel (ADMIN. 309), with other materials (official transcript, current vita, signed offer letter, signed Faculty Tenure Agreement, letters of reference) required for the personnel credential file.***

**A copy of this form also needs to be sent to EOP along with Part II of the Compliance Report.**