

Canisius College

Educational Partnership Employment Verification Form

Students should complete this form each semester and return to:

Canisius College
Student Records and Financial Services
Attn: Brittney Puckerin
2001 Main St.
Buffalo, NY 14208

Name of Student _____

Canisius College ID # _____

Employer _____

Job Title _____

Telephone Number (____) _____ -- _____

Graduate Program _____

Semester (circle one) Fall Spring Summer Year 20__ __

Signature of Student _____

In addition to this form, you must **submit proof of eligibility**, which includes your most recent pay stub or letter of employment from your employer stating that you are currently employed at one of our partner organizations.