NACCAS Sample Employment Verification Phone Log

Graduate Name (include nicknames, etc.):
Employer Name:
Employer Address:
Employer Phone #:
Dates of Employment:
Graduate's Position Title:
Contact Manager:
Date of Verification:
Information Verified by (name of school official):
School Official Signature:

Self-Employment Certification

l,	certify that I am currently self employed as a	, and
have been since	I may be contacted at the following phone	
number:	·	
The name of my business is:		
I certify that my	(driver's license, state ID card, etc.) was present	at the time of
signing this document.		
Student Signature	Date	
School Official's Signature	 Date	

NACCAS Sample Employment Follow-Up Survey:

(To be completed by the employer)

Graduate Name (include nicknames, etc.):
Employer Name:
Employer Address:
Employer Phone #:
Dates of Employment:
Graduate's Position Title:
Contact Manager:
Date Survey Completed:
Staff Member Completing Survey (Printed Name):
Staff Member Completing Survey (Signature):