

# UNIVERSITY OF HARTFORD

200 Bloomfield Avenue  
West Hartford, CT 06117

To whom it may concern:

This is evidence of on-campus employment for:

\_\_\_\_\_ **(Student Name)** \_\_\_\_\_ **Student ID Number**

**Job Title:** \_\_\_\_\_

**Start Date:** \_\_\_\_\_ **End Date (if known):** \_\_\_\_\_ **Hours/Week:** \_\_\_\_\_

**Job Description:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## Department/Employer contact information:

University of Hartford Employer Identification Number (EIN): **06-0731360**

Department Offering Employment: \_\_\_\_\_

Student's Immediate Supervisor Name: \_\_\_\_\_

Supervisor's Title: \_\_\_\_\_

Supervisor's Phone Number: \_\_\_\_\_

Supervisor's Email: \_\_\_\_\_

**Supervisor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Student's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_