



Human Resource Services
 New Mexico State University
 MSC 3HRS, Box 30001
 Las Cruces, NM 88003-8001
 Phone: (575) 646-8000
 Fax: (575) 646-2806

Requesting letter of Employment Verification

Requestor Information	
Employee Name:	Banner ID:
Title:	Department:

I hereby request the below information be included in my request for a letter of employment verification. I authorize New Mexico State University to release the requested information in the format described below.

_____ *Signature* _____ *Date*

Please include:

- Dates of Employment
 - Current Position
 - History
- Position Title
- Hiring Department
- Salary
 - Annual
 - Semi-monthly
 - Hourly
- Other _____

Email Address: _____

All Employment verifications are emailed unless otherwise requested.
 (Note: Social Security information will not be included in letter.)

- To be picked up by the Employee
- To be mailed to the following address:

(FOR HUMAN RESOURCE SERVICES USE ONLY)

Request completed by:	Date Completed:
Title:	Department: