

Education Department Date

1200 University Avenue
Riverside, CA 92507
Tel: 1.951.827.4105
Fax: 1.951.827.7273
www.extension.ucr.edu

Commission on Teacher Credentialing
PO Box 944270
Sacramento, CA 94244-2700

To whom it may concern:

Please let this letter serve as verification of employment of Candidate's Name at Name of Company during the period of month/day/year to month/day/year. During the above period, Candidate's Name was employed Full-time or Part-time as a Job Title for an average of # hours per week.

In this regard, the nature of his/her duties and responsibilities were as follows:

Sincerely,

(Signature) Please physically sign, computer generated signatures will NOT be accepted.

Name of Company Representative
Title
Phone
Email

Note: A job description attached to this letter is required.

Self-employment requirements:

If the applicant was self-employed verification shall include a notarized letter, signed by the applicant under penalty of perjury, detailing employment/ job description duties as described in the UCR Extension sample letter above, and must be further substantiated, in a notarized letter, by at least one other person having first-hand knowledge of the applicant's self-employment such as the applicant's accountant, major supplier of goods, or major user of goods or services. Additional tax forms such as Schedule C and 1099 forms may be requested upon review by the Credentials Office.