

CTE Credential Program

Pre-Screening Work Verification Cover Letter

Please **complete** the checklist below to verify that you have included all the required information. Sign the required certification statement at the bottom and submit this completed form with your pre-screening documents.

Name:		
Work Experie	ence Verification Letters	
The lette	er must clearly state all the following details:	
Yo	our Name	
Yo	our position and title	
Co	omplete description of Job duties	
D	ates of employment beginning and ending (months and years)	
Ft	ull-time or Part-time (accounting of the <u>total number</u> of hours worked)	
Pı	rinted on company letterhead	
In	aclude Supervisor's name and position	
Si	gned by the Supervisor/HR Representative (original or adobe certified)	

Self-Employed Letter

The letter must be a notarized self-verification letter including the Required Certification Statement below and must also include:

Supporting letter(s) from individuals with first-hand knowledge of your self-employment or relevant work

Five (5) additional documents to support your notarized self-verification letter such as a copy of tax form statement, business cards, current/former business license(s) or permit(s) within dates on letter, letters from former customers (must state the jobs done and the length of the jobs), letters from suppliers, or other business associates (such as your accountant, lawyer), who can verify your occupation

Please review and sign the Required Certification Statement:

"I certify under penalty of perjury that t	the contents of the letter(s) submitted to the
credential program are true and correct	t to the best of my knowledge."

Signature:	Date:
Associated and the second second second second	1 -11-12-42-1

Attach this completed and signed check list with supporting letters to your email submission.