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HTM 4964 Field Study – Employment Verification Form

This form is to be completed as soon as you have completed the 300 hour prerequisite and submitted with the necessary employment documentation (pay stubs or employer letter) by the dates below regardless of when you plan to enroll. Completed forms should be submitted to the HTM Department office in Wallace Hall, Room 362. If multiple jobs, please complete a form for each job and submit the necessary documentation.   **Summer – Dec 1   Fall – May 1   Spring – Sept 1.**

Student Information – Please Print

Last: _____   First: _____

E-mail: _____   Student ID: _____

Anticipated Graduation Date (circle): December / May / Summer I / Summer II   Year:_____

Employer Information – Please Print

Name of Company/Division: _____Website Address: _____

Supervisor Name: _____ Title: _____

Business Address: _____

City/State/Country/ZIP: _____

Phone: _____ Fax: _____ Email: _____

Business Industry Segment (circle one):

Airlines	Event Planning	Stadiums/Arenas (depending on
Casino/Gambling	Golf/Country/City Clubs	position)
Conference Centers/Services	Hotel/Resorts (property & corporate)	Travel/Tourism
Convention Facilities	Restaurants	Winery
Cruise Lines/Tour Operators	Spa	
Dining Services	Sports/Entertainment	

***Jobs that are not acceptable include, but are not limited to, retail, lifeguarding, daycare or day camp counseling, concessions, cashiering, and banking. ***

Your Job Title: _____

Dates Worked From (MM/YY): _____ to (MM/YY) _____ Total Hours Worked: _____

Job Responsibilities: Attach a position description and include documentation that details total hours worked (time clock report, pay stubs, etc.) A W-2 is not sufficient. In lieu of a job description, you may also attach a letter, signed by your supervisor on company letterhead, which details your position duties and attests to the fact that you worked 300 hours.

Student Attestation – Please Sign

I am responsible for the content and integrity of the information supplied on this form and understand that any misinformation violates the rules of the University's honor code and may result in a referral to the Office of the Undergraduate Honor System. The Department of Hospitality and Tourism Management reserves the right to verify any of this information.

Student Signature: _____ Date:_____

Office Use Only

Approved _____   Denied _____

Reviewed by_____ Date:_____