

(on Official Company Letterhead)

**Sample Letter for
Employment Verification**

(date of Letter; month/day/year)

To Whom It May Concern:

_____ has been employed with _____ since
(first and last name of applicant) (company name)

_____ to _____ as an _____.
(month/day/year of employment start date) (month/day/year of employment end date) (job title, e.g. EMT)

He/she works _____ in the _____ area with a call volume
(part-time, full-time, volunteer) (city)

consisting of _____ and _____.
(percentage of BLS calls) (percentage of ALS calls)

If you have any questions, please feel free to call me at _____.
(Supervisor's contact phone number including extension.)

Sincerely,

(Supervisor's Signature)

(Supervisor's printed first and last name)

(Supervisor's Job Title)

Sample Letter

Remember to send the **original** letter
with your application. If you have any
questions, please call our office at
310-680-1100.