

# UT Law Loan Repayment Assistance Program

## Employment Verification

### TO BE COMPLETED BY THE APPLICANT:

I authorize my employer to provide the information requested below to The University of Texas School of Law.

Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### TO BE COMPLETED BY A REPRESENTATIVE OF THE EMPLOYER:

The applicant above has applied to the UT Law Loan Repayment Assistance Program. As part of the application process, each applicant must submit verification of his or her employment status. Please complete the information requested below and return this form to the applicant. Thank you.

Employer \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Employee's title \_\_\_\_\_

Employment start date & end date (if applicable) \_\_\_\_\_

Does employee work at least 35 hours per week? \_\_\_\_\_

Annual gross salary \_\_\_\_\_

Do you expect to employ the applicant in this position for at least the next six months? \_\_\_\_\_

Brief job description (or attach a published copy of the employee's job description).

Name of representative: \_\_\_\_\_

Signature of representative: \_\_\_\_\_ Date: \_\_\_\_\_