



EL PASO INDEPENDENT SCHOOL DISTRICT

Human Resources

1014 N. Stanton St.
El Paso, TX 79902
Phone (915) 230-2005
Fax (915) 230-0005
www.episd.org

Request for Verification of Employment

Return form via email to hr@episd.org, fax to (915)230-0005, send through inter-district mail to Human Resources, or mail to EPISD.

Name: _____

Other name(s) records may be listed under: _____

TEAMS ID #: _____ Last 4 #s of your Social Security #: _____

Telephone # (to contact you if we have questions concerning your request): _____

Please select one option (if not selected, your complete social security number will appear)

- Include my complete social security number
Include on the last 4-digits of my social security number
Do not include my social security number

Information you are requesting to be verified:

- Hire Date, Termination Date, Position, First/Last Day on Duty, Rate of Pay (Salary), Frequency of Pay, Location, Number of Days on Duty, Other (Please explain):

What would you like us to do with your request?

- Pick-up at Human Resources
Current Employees - Send inter-District mail, Campus/Dept.:
Mail to:
Address:

City: _____ State: _____ Zip: _____

Fax to:
Company Name _____ Fax #: _____

Attention (Individual's Name): _____

Due to the high level of employee confidentiality of personnel information, my signature below authorizes Human Resources to release only the information requested in this document to the above listed individual/company, if other than myself. I understand that should additional information need to be verified that has not been specified on this document, this form may not be adjusted and a new request must be submitted. I further understand that all requests for employment verification are done on district letterhead in letter format and are completed within five to ten business days from date of request.

Signature

Date