

Mesa Partnership Scholarship Verification Form



Student Contact Information

Student Name	
Full Address	
Student Phone	
Student Email	
Parent/Guardian Name	
Parent/Guardian Work Phone	
Parent/Guardian Work E-mail	

Parent Employer Information

Parent/Guardian Employer	
Parent/Guardian	
Department/Division	
Parent/Guardian Supervisor	
Supervisor Work Phone	
Supervisor Email Address	

Employment Verification

Please check the appropriate box on employment status: Full-time Part-time Contract

How long have you been serving as the employee's supervisor? ____ Years

By signing below, you verify that you serve as the supervisor for the employee listed above and that the employment status checked is accurate.

Signature: _____ Date: _____

Office Use Only

Received:

Date _____ By: _____

Employment Verification Completed:

Date _____ By: _____

**Return this form to:
Benedictine University at Mesa
225 E. Main St., Mesa, AZ 85201
Fax: 602-888-5555**