



RETURN COMPLETED FORM TO: **Seton Hall University - Human Resources**
400 South Orange Avenue
South Orange, NJ 07090 / (fax) 973-761-9007

VERIFICATION OF FORMER EMPLOYMENT with a UNIVERSITY/ COLLEGE

(For the two years IMMEDIATELY prior to joining Seton Hall University)

Section I - To be completed by the employee (Please print)

Employee Name : _____

Soc. Sec. No.: _____ SHU Hire Date: _____

Current Position Title: _____

Former Employer: _____

Dates of Employment FROM: _____ TO: _____

Telephone Number / Fax Number / E-mail Address of Former Employer:

I authorize my former employer, listed above, to release the following information. I understand that contributions cannot be made to the Seton Hall University Retirement Annuity until this information is received and verified.

Signature: _____ Date: _____

Section II - To be completed by your former university/college employer

Position Title: _____ Hire Date: _____

Term. Date: _____ Benefit Eligible: Yes _____ No _____

Employment Status: F/T _____ P/T _____ hrs / week _____ Adjunct _____

Breaks in Service (list dates): _____

Name of Person Completing Form: _____ Title: _____

Signature: _____ Date: _____