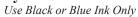
Petition Services

Employer's Verification Form





B-150 ASB (801) 422-6570 / Fax: (801) 422-0615 E-mail: petitions@byu.edu Website: http://petitions.byu.edu

Full Name (Last, First, Middle)	BYU ID#	Semester/T	erm/Year
I authorize my employer to provide the univ Student Signature	-	rant to my petition.	
Empl	oyer's Verification:		
Company Name	-		
Hire Date Nur	mber of hours worked per we	eek	
Has there been a recent change in hours? □	Yes □ No Date E	ffective	
Was the student's schedule changed to accord	mmodate the needs of the con	mpany? Yes	□No
Was the student's schedule changed to accord	mmodate the needs of the stu	dent?	□No
When was the student notified of the change	e in his/her employment sche	dule?	
☐ several days ago ☐ a week ago	☐ several weeks ago ☐	more than a month	ago
How many hours per week is the student wo	orking in the new schedule?		
Additional Comments:			
Employer's Printed Name			
Employer's Signature	Date		
CURMICCION INCERTICATIONS:			

Submission Instructions:

You may give this form to the student or fax (801-422-0615) or mail this signed form (B-150 ASB, Provo, UT 84602) to the Petitions Services Office. If you have any questions or concerns, please contact our office at 801-432-26570 or email at: petitions@byu.edu