

HIRING CERTIFICATION FORM FOR FINAL CANDIDATE

REQUISITION #: _____

DEPARTMENT: _____

CAMPUS ADDRESS: _____

JOB TITLE: _____

PROPOSED START DATE: _____

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE: (HOME) _____ (WORK) _____

EMPL ID: _____ BIRTHDATE _____

VERIFICATION OF WORK INFORMATION:

Name _____ Tel.# _____ Date: _____

For Academic Hire: Hiring Department completes

Name _____ Tel.# _____ Date: _____

For Civil Service Hire (Bargaining & Non-Bargaining): Hiring Department completes

VERIFICATION OF DEGREE/LICENSE/CERTIFICATION:

Name _____ Tel.# _____ Date: _____

For Academic Hire: Hiring Department completes

Name _____ Tel.# _____ Date: _____

For Civil Service Hire (Bargaining & Non-Bargaining): Hiring Department completes

APPROVAL FOR HIRE

Name _____ Tel.# _____ Date: _____

For Civil Service (Bargaining & Non-Bargaining) and Academic Hire: Department Supervisor or Designee SIGNATURE

Name _____ Tel.# _____ Date: _____

For Civil Service (Bargaining & Non-Bargaining) and Academic Hire: Department Head/Director or Designee SIGNATURE

FOR ACADEMIC HIRE: PROVIDE TO VCAA WITH HIRE DOCUMENTS

FOR CIVIL SERVICE HIRE (BARGAINING & NON-BARGAINING): HR RETAINS WITH HIRE DOCUMENT.

**LIST CONTACTS FOR WORK INFORMATION AND
DEGREE/LICENSE/CERTIFICATION VERIFICATION**

NAME OF CANDIDATE: _____

1.) PERSON CONTACTED _____

Organization/Company _____

Information Verified _____

Define discrepancies _____

2.) PERSON CONTACTED _____

Organization/Company _____

Information Verified _____

Define discrepancies _____

3.) PERSON CONTACTED _____

Organization/Company _____

Information Verified _____

Define discrepancies _____

4.) PERSON CONTACTED _____

Organization/Company _____

Information Verified _____

Define discrepancies _____

5.) PERSON CONTACTED _____

Organization/Company _____

Information Verified _____

Define discrepancies _____

6.) PERSON CONTACTED _____

Organization/Company _____

Information Verified _____

Define discrepancies _____