

PENNSYLVANIA STATE POLICE EMPLOYMENT VERIFICATION FOR PROSPECTIVE EMPLOYER

NOTES: This form is used for prospective employers that do not supply their own employer questionnaire. Requests to release employment information may be fulfilled only when accompanied by a signed authorization from the individual. As some records may need to be retrieved from archives, please allow a minimum of 5 business days to fulfill the request.

Name of Current/Former Personnel: _____

SSN (Last 4 digits only): XXX – XX –

Job title: _____

Date of hire: _____ Date of Separation: _____

Reason for separation: _____

Did this individual leave in good standing? Yes No If No, please explain in comments section.

Would you re-employ this individual? Yes No If No, please explain in comments section.

Comments: _____

LAST PERFORMANCE EVALUATION RATINGS

Dates Evaluation Covers:	Outstanding	Commendable	Satisfactory	Needs Improvement	Unsatisfactory
<ul style="list-style-type: none"> • From • To 					
Job Knowledge/Skills					
Work Results					
Communications					
Initiative/Problem Solving					
Interpersonal Relations/ Equal Employment Opportunity (EEO)					
Work Habits					
Supervision/Management					
Overall Rating					

Verified by: _____

Date: _____ Signature