

Financial Aid Office  
One Shields Avenue  
(530) 752-2390

**STLJOB**

University of California  
Davis, CA 95616-8596  
*financialaid.ucdavis.edu*

## JOB VERIFICATION LETTER FOR SHORT-TERM LOAN APPROVAL

DATE: \_\_\_\_\_

(Student's full name) \_\_\_\_\_ is employed at  
\_\_\_\_\_. His/her beginning date of employment  
is/was \_\_\_\_\_ and the ending date will be \_\_\_\_\_.  
His/her rate of pay is \$ \_\_\_\_\_ an hour @ \_\_\_\_\_ hours each week; or a monthly  
salary of \$ \_\_\_\_\_.

\_\_\_\_\_  
Employer's Signature

\_\_\_\_\_  
Employer's Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Business Address/Department Name