



COLORADO
Department of
Higher Education

**– Employment Verification –
State Loan Forgiveness Programs**

From: _____ |

Re: Employee Verification of _____

This letter is to provide verification that _____

is currently employed

in the _____

for the 2025-2026 academic

They are working now as a _____

year. , and working primarily at _____

They are employed _____ .

The age range they predominantly work with in this capacity is _____ ,

hours,

a week.

By signing, I certify that I am an authorized official of the organization (district/school) named and that the employment information I am supplying is true to the best of my knowledge.

Sincerely,

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