

Date: [Insert Date]

[Borrower Full Name]
[Employee ID Number]
[Address]
[City, State, Zip Code]

Subject: Verification of Employment for Student Loan Discharge/Forgiveness

To Whom It May Concern,

This letter serves to officially verify the employment status of **[Employee Full Name]** with **[Name of Government Agency/Department]** for the purpose of [Public Service Loan Forgiveness (PSLF) / Total and Permanent Disability (TPD) Discharge / Other Program Name].

Our records confirm the following employment details:

- **Employment Start Date:** [MM/DD/YYYY]
- **Employment End Date:** [MM/DD/YYYY or "Present"]
- **Job Title:** [Insert Title]
- **Employment Status:** [Full-Time / Part-Time]
- **Average Hours Worked Per Week:** [Insert Number]
- **Employer Type:** [Federal / State / Local / Tribal] Government Entity

I certify that the information provided above is true and correct according to our official personnel records. [Name of Government Agency] is a qualifying public service organization under the guidelines of the U.S. Department of Education.

If you require additional documentation or have further questions regarding this employee's service, please contact the Human Resources Department at [Phone Number] or [Email Address].

Sincerely,

[Signature]
[Printed Name of Authorized Official]
[Title of Authorized Official]
[Name of Government Agency]
[Agency Address]