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SOCIAL SECURITY NUMBER

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MPC STUDENT'S ID NUMBER

## 2020—2021 Authorization to Request Employment Information

Use ink only.

Last Name	First Name	Middle Initial
Address	City	State      Zip
(_____) _____ Phone Number	E-Mail Address	
_____	_____	

I, \_\_\_\_\_,

hereby request \_\_\_\_\_  
Employer

to release the last date of employment to Monterey Peninsula College's Student Financial Services Office.

I understand that this release form is for one time only and if I want to request MPC's Student Financial Services Office to request more information from my employer/previous employer I will need to complete a new form.

\_\_\_\_\_  
 Student's Signature Date

**Employer:** \_\_\_\_\_

We certify the last date of employment for the above person is: \_\_\_\_\_

_____ Printed Name	_____ Title
_____ Signature	_____ Date