

Employment Verification Letter

Date: [Insert Date]

To Whom It May Concern,

This letter is to verify the employment of **[Employee's Name]**, who worked with us at **[Healthcare Facility Name]**. The employee has been part of our support staff team since **[Start Date]** and continues to hold the position as **[Job Title]**.

Employee Details:

- **Name:** [Employee's Name]
- **Position:** [Job Title]
- **Department:** [Department Name]
- **Employment Status:** [Full-Time/Part-Time]
- **Work Schedule:** [Days/Hours]
- **Supervisor:** [Supervisor's Name]

During their time with us, [Employee's Name] has demonstrated a high level of professionalism and dedication to their duties, contributing positively to the work environment.

If you have any further questions or require additional information, please feel free to contact me at **[Your Phone Number]** or **[Your Email Address]**.

Sincerely,

[Your Name]

[Your Title]

[Healthcare Facility Name]

[Healthcare Facility Address]

[Phone Number]