Acute Care for Health Care Assistants Program

Employment Verification Form

Broadway campus
1155 East Broadway
Vancouver, B.C. V5T 4V5
f: 604.871.7458

Downtown campus
250 W. Pender Street
Vancouver, B.C. V6B 1S9
f: 604.443.8450
t: 604.871.7000,
press option 4

Student information

Student ID

Last name

First name

For completion by the employer

The above named has applied to the Acute Care – Health Care Assistant program at Vancouver Community College. Part of the application process is verification of hours worked as a Health Care Assistant, please complete the information below:

Name of agency

Employment title of applicant

Number of hours worked to date

Employer phone number

Employer contact name

Signature

The information on this form is collected under the authority of the BC Freedom of Information and Protection of Privacy Act (1992) and is needed to process any changes in your student record. If you have any questions about the collection and use of this information contact the registrar.

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