Required Leave Employment Verification Form

Students should complete the first section of this form and then have their employer complete the remainder.

Note To The Student And Employer:

The School of Hotel Administration requires its students on required leave to work in the hospitality service industry as part of their requirement to re-enter as a student. This work experience will count towards their Practice Credit requirement if it meets the guidelines. The objective of the Practice Credit requirement is to ensure that our students’ education has the essential balance between theory and practice.

In addition to this form, the employer will need to supply a letter of recommendation so we can evaluate the student’s work performance.

To receive Practice Credit, students should keep the following in mind:

- You must earn 2 units of practice credit. You must work a minimum of two separate employment periods, holding a minimum of two significantly different positions. No single position may qualify for more than 400 hours (one unit). If you have worked in one particular job for more than 400 hours, it will only qualify for one unit.

- To receive 2 units of practice credit from the same organization, you must obtain prior approval from Career Management.

- You may receive partial credit for employment if you did not complete 400 hours in one position. You may earn no less than 0.1 of a unit, the equivalent of 40 hours worked.

- You must submit all Employment Verification forms prior to registration for your final two semesters.

- You will not be allowed to graduate unless you process and submit Employment Verification forms for appropriate work experience to Career Management, and receive notification that the Practice Credit requirement has been met.

Please return your completed Required Leave Employment Verification Form to the Office of Student Services, Career Management, 180 Statler Hall.
Required Leave Employment Verification Form

To Be Completed by the Student

Last ___________________________ First ___________________________
E-mail: ___________________________ Student ID: ___________________________
Graduation date: ___________________________ Entered S.H.A. as: Freshman ❑ Transfer ❑

Which source led you to this position?
❑ On-Campus Recruiting ❑ Staff referral ❑ Personal Contact
❑ Summer Job Listing ❑ Alumni Contact ❑ Career Day
❑ Student Organization/Club ❑ Faculty Contact ❑ Other ___________________________

I am responsible for the content and integrity of the information supplied on this form and understand that any misinformation violates the rules of the University’s code of Academic Integrity, and may result in a referral to the Office of Judicial Administrator. Career Management reserves the right to verify any of this information.

Student Signature ___________________________ Date ___________________________

To Be Completed by the Employer

Name of Company/Division ___________________________ Department ___________________________
Company Website Address ___________________________
Supervisor Name ___________________________ Title ___________________________ Cornell Alum? Year _______
Business Address ___________________________
City/State/Country/Zip ___________________________
Phone ___________________________ Fax ___________________________ E-mail ___________________________

Business Industry Segment (please circle):
Banking/Financial Services ❑ Cruise Lines ❑ Golf/Country Club ❑ Real Estate ❑ Spa
Casino/Gaming ❑ Design ❑ Hotel/Resort – Corporate ❑ Restaurant ❑ Sport/Entertainment/Leisure
Consulting ❑ E-Commerce ❑ Hotel/Resort – Property ❑ Retail ❑ Travel/Tourism
Consumer Products ❑ Event Planning ❑ Managed Services ❑ Senior Living ❑ Other: ___________________________

Student Title ___________________________
Dates worked from / / to / / Total number of hours worked ___________
Average number of hours worked per week: ___________
Paid ❑ Unpaid ❑ Stipend ❑ Compensation (in U.S. Dollars) $ __________ Hourly ❑ Weekly ❑ Monthly ❑ Entire Job ❑
Other Compensation (check all that apply): Tips ❑ Housing ❑ Meals ❑ Transportation ❑ Other: ___________________________

Student job responsibilities included ___________________________

I verify that the information regarding the student’s work experience is correct.
Supervisor signature ___________________________ Date ___________________________

Office Use Only

Approved ❑ Denied ❑ ________ Units of Practice Credit earned

Reviewed by ___________________________ Date ___________________________

Updated: 5/2011