



**American
Institute of
Medical
Sciences &
Education**

AIMS EDUCATION

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Phone: (908) 222-0002 Fax: (908) 450-6111

WWW.AIMSEDCATION.EDU

Excellence & Success

GRADUATE EMPLOYMENT VERIFICATION FORM

Thank you so much for providing the opportunity by hiring our graduate student _____. Getting a position after graduation is often very difficult, we are sure that our graduate will meet your requirements and continue to perform at your expectations.

In order to verify employment and for statistical purpose, we ask that you please complete the bottom of this form where marked and fax it to us at (908) 450-6111 or email at Career@aimseducation.edu. All replies will be kept confidential.

We thank you for considering AIMS Education as a source for your employment needs and encourage you to contact us with any future requirements. As always, there is no charge to the employer for our services.

Sincerely,

Career Service Administrator
AIMS EDUCATION

EMPLOYER CERTIFICATION

Name of the Employer _____

Address _____ **Phone Number** _____

Name of Employee _____ **Position** _____

Employment Period _____ --- _____ **Salary/Hr.** _____ / Confidential



Graduate Student Performance Rating: (Please select one)

[] 5 (Outstanding), [] 4 (Good), [] 3 (Fair/ Needs Improvement), [] 2 (Unsatisfactory)



Overall Rating of the Program: (Please select one)

[] 5 (Excellent), [] 4 (Good), [] 3 (Satisfactory), [] 2 (Fair), [] 2 (Poor)



If Given the Opportunity, would you hire another graduate from this program? Yes / No



Signature of Verifier / Supervisor _____ **Date** _____

Name of Verifier / Supervisor _____ **Title** _____

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