



WESTMINSTER CAMPUS

3645 West 112th Avenue
Westminster, CO 80031
303.404.5000 Tel
www.frontrange.edu

Re: Healthcare or Customer Service Employment/ Volunteer Hours Verification
PLEASE USE THIS FORM.

Date:

To Admissions Committee:

_____ is applying for the A.A.S. Nursing Program at Front Range Community College-Westminster Campus. As part of the application process, students may verify the number of hours of experience in healthcare or customer service. Both employment and volunteer experience will be considered.

POSITION HELD: _____

This letter and my signature confirm that _____ is currently or has been employed/ volunteered in the healthcare or customer service role stated above for _____ hours (within the past 5 years).

Director/Manager Signature

Date

Contact Information (please print)

Name _____

Organization _____

Address _____

Email _____

Phone _____

In addition to this form, a copy of a job description or letter outlining job/volunteer duties must also be included in the submitted application.