

EDUCATION VERIFICATION

To:

Employee:

Name (if different) when degree awarded:

Social Security Number:

Degree and Date Earned:

The above individual is a new employee at North Carolina State University. North Carolina law General Statute 125:30 requires the University to verify credentials within 90 days of the University hire date. The employee understands this legal requirement and has agreed by signature on his/her application to release of this information. Please complete the section below and return this form in the enclosed self-addressed, stamped envelope. Thank you.

**Deborah A Nachtrieb
Personnel Assistant**

919-515-7929

To be completed by the Office of the Registrar

Please use official stamp or raised seal

Attendance Dates: ___/___(mo/yr) to ___/___(mo/yr)

Credit Hours completed: _____

The following was awarded:

___ Degree ___ Diploma ___ Certificate ___ none

Please list degree(s)/ major(s) _____

Signature of Registrar _____ Date ___/___/___