

# AIM UNIVERSITY GROUP IS REQUESTING EMPLOYMENT AND COMPETENCY VERIFICATION FOR TENISHA HARPER

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Dear Sirs,

Ms. **Tenisha Harper** is seeking admission to undergraduate level courses at AIM University Group. She's seeking to enter the Level 5 Higher National Diploma in Healthcare Practice but must evidence a minimum of five years of solid work experience and sound knowledge of management and leadership skills.

## OUR REQUEST

**Ms. Tenisha Harper** has named you as her immediate Supervisor. To advance her application for consideration for acceptance, the Admission Committee is hereby requesting your cooperation in providing employment and competency verification for the applicant. This verification method will be used to measure her knowledge, skills, judgments, and behaviors in line with the program criteria.

## CONFIDENTIALITY

If you agree to participate, you will be provided a **Verification Of Employee Competency Form** to be completed and returned directly to us by email. Your assessment and feedback will be held in strict confidence and your assessment will not be shared in form or media with Ms. Harper.

## APPLICANT'S AND EMPLOYER'S CONSENT

The applicant, **Tenisha Harper** has granted us permission to collect this information from you for the sole purpose of determining her level of work competency and readiness for the undergraduate-level studies in Health care Practice.

### APPLICANT'S AGREEMENT

Name of Applicant \_\_\_\_\_

Date of Consent \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

### EMPLOYER'S AGREEMENT

Name of Supervisor \_\_\_\_\_

Job Title \_\_\_\_\_

Work Email Address \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_

Date of Consent \_\_\_\_\_

Please return to [enroll@aimuniversitygroup.org](mailto:enroll@aimuniversitygroup.org) only when signed by both Applicant and Employer. Thank you for your promptness and cooperation.

Enrollment Officer:  \_\_\_\_\_

(Chris-Ann-Toni Hunter, MBA)