

# ACICS PLACEMENT VERIFICATION PROGRAM

## STUDENT PLACEMENT ATTESTATION FORM

By completing and signing this form or authorizing the school official to complete it on your behalf, you agree with the information provided. Please note that you may be contacted by the Accrediting Council for Independent Colleges and Schools (ACICS) in order to verify the information provided.

I, \_\_\_\_\_, attest that the training I have received  
FULL NAME  
in the \_\_\_\_\_ program at \_\_\_\_\_,  
PROGRAM INSTITUTION/CAMPUS  
located in \_\_\_\_\_, \_\_\_\_\_ was beneficial in obtaining or maintaining  
CITY STATE  
the position of \_\_\_\_\_ at \_\_\_\_\_.  
POSITION TITLE EMPLOYER NAME

**1. TYPE OF BENEFIT** – I was able to benefit from the skills and knowledge learned in my program by  
[INITIAL ONE]:

1a. \_\_\_\_\_ Obtaining a **new** position that: [CHECK ONE]

- ☐ Utilizes such skills and knowledge
- ☐ Requires the credential provided through my program

1b. \_\_\_\_\_ Maintaining a **current** position that utilizes the skills and knowledge learned in my program that:  
[CHECK ONE]

- ☐ Fulfills requirements for professional development
- ☐ Fulfills requirements for a possible future promotion
- ☐ Fulfills my goal of improving job-related skills

**2. TYPE OF POSITION** – My new or current position is a paid job that **meets my employment goal** through:  
[INITIAL ONE]

- \_\_\_\_\_ Full-time, permanent work for a single employer (defined here as greater than or equal to 20 hours per week)
- \_\_\_\_\_ Part-time permanent work for a single employer (defined here as 7.5 to less than 20 hours per week)
- \_\_\_\_\_ Self-employment with multiple possible customers (e.g., as a small business owner)
- \_\_\_\_\_ Independent contract work with multiple possible customers (e.g., as a “free-lance” contractor)
- \_\_\_\_\_ Temporary agency work (on jobs related to the field of study)
- \_\_\_\_\_ Temporary work (on jobs lasting 1 month or more that could lead to repeated, sustained employment)
- \_\_\_\_\_ Practical training (as allowed by your student visa)
- \_\_\_\_\_ Other paid work (please describe): \_\_\_\_\_

\_\_\_\_\_  
GRADUATE/COMPLETER SIGNATURE

\_\_\_\_\_  
CAREER SERVICES/MANAGEMENT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DATE