



**Verification for Partner Organization Discount  
2024-25 Academic Year**

This form needs to be completed on an annual basis for the new Academic Year. If the form is not received the tuition discount will not automatically renew into the New Year.

Student Name: \_\_\_\_\_ Student ID Number: \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

***To be completed by Employer/Supervisor:***

This is to certify that the student listed above is currently employed/member of at:

Name of organization: \_\_\_\_\_

Member since (xx/xx/xxxx) \_\_\_\_\_

and/or

Working \_\_\_\_\_ hours per week and have been employed since (xx/xx/xxxx) \_\_\_\_\_

**Authorized Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Company name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Please email your completed form to [financialaid@denverseminary.edu](mailto:financialaid@denverseminary.edu) or mail to the address below.

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Littleton, CO 80120  
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303-783-3122 (fax)