

AJEJDRIKDRIK, INCORPORATED

P. O BOX 318
MAJURO, MH 96960

FROM: **THE MANAGER OF** _____

SUBJECT: MANAGER'S STATEMENT

THIS IS TO CERTIFY THAT THE BELOW NAMED EMPLOYEE IN MY DEPARTMENT HAS BEEN WORKING WITH US **FOR AT LEAST EIGHTY HOURS PER PAY PERIOD**. FURTHER, THE EMPLOYEE IS EMPLOYED ON A **FULL TIME BASIS** AND IS EXPECTED TO CONTINUE IN THAT CAPACITY **FOR AT LEAST TWO YEARS**. ASSUMING THAT THE EMPLOYEE MEETS PAYROLL REQUIREMENTS, I SEE NO REASON WHY HE/SHE SHOULD NOT BE CONSIDERED FOR CREDIT.

EMPLOYEE'S NAME: _____

DEPARTMENT: _____

JOB TITLE: _____

DATE HIRED: _____

SUPERVISOR'S NAME: _____
(PLEASE PRINT NAME)

SUPERVISOR'S SIGNATURE: _____

MANAGER'S NAME: _____
(PLEASE PRINT NAME)

FUTHER, I FULLY COMMIT TO NOTIFY AJEJDRIKDRIK, INCORPORATED IMMEDIATELY IN CASE I FIND REASON TO BELIEVE THAT THE SUBJECT EMPLOYEE IS GOING TO BE TERMINATED FROM WORK.

MANAGER'S SIGNATURE: _____

DATE: _____