

EMPLOYMENT VERIFICATION

*Note: upfront income verification or paystubs are to be obtained when possible. Only use third-party employment verification when those sources are not available.

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| TO BE COMPLETED BY EMPLOYER |
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IF NOT APPLICABLE, PLEASE WRITE N/A. DO NOT LEAVE BLANK SPACES AND DO NOT USE WHITE-OUT.

Employee Name: _____ Job Title: _____

Presently Employed: Yes _____ No _____

Date first employed _____

If not presently employed, last day of employment _____

Current Wages/Salary: \$ _____ hourly weekly bi-weekly semi-monthly monthly yearly other _____

Average # of regular hours per week: _____

Overtime Rate: \$ _____ per hour

Average # of overtime hours per week: _____

Shift Differential Rate: \$ _____ per hour

Average # of shift differential hours per week: _____

Commissions, bonuses, tips, other: \$ _____ hourly weekly bi-weekly semi-monthly monthly yearly other _____

How is employee paid? Direct Deposit Cash Pay Card Check Other _____

Will there be a change in the employee's rate of pay within the next 12 months? Yes _____ No _____ Effective date: _____

If yes, what is the new rate of pay: _____

Is employment seasonal or sporadic? Yes _____ No _____

If the employee's work is seasonal or sporadic, please indicate the layoff period(s): _____

Is employee eligible for unemployment compensation? Yes _____ No _____ If yes, how long? _____ How much? _____

Additional remarks: _____

Employer's Signature

Employer's Printed Name

Date

Employer [Company] Name and Address

Phone #

Fax #

E-mail

NOTE: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to make willful false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.



We encourage and support the nation's affirmative housing program in which there are no barriers to obtaining housing because of race, color, religion, sex, national origin, handicap, or familial status.

