

EMPLOYMENT VERIFICATION

TO BE COMPLETED BY EMPLOYER

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

Position (Job Title): \_\_\_\_\_

Date of Hire: \_\_\_\_\_

Pay Rate: Hourly\*: \_\_\_\_\_ Monthly: \_\_\_\_\_ Annually: \_\_\_\_\_

\*If hourly, please include the number of hours worked on average per week: \_\_\_\_\_

Is There Be Any Anticipated Change in the Employee's Salary in the Next 12 Months?

\_\_\_\_\_

Likelihood of Continued Employment (circle one) : Strong Average Poor

Additional Comments:

\_\_\_\_\_

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\_\_\_\_\_

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\_\_\_\_\_

Signature

\_\_\_\_\_

Title

\_\_\_\_\_

Phone Number

\_\_\_\_\_

Date

THANK YOU