EMPLOYMENT VERIFICATION FORM

- This form is used to obtain information regarding the employment history of Applicants for rental housing. The information provided by the current or former Employer may be used solely for the purpose of evaluating the application for rental housing.
- The Owner/Agent requesting this information must receive authorization from the Applicant before obtaining the information. Such authorization is granted if Applicant's signature is provided in Section 2. Copies of this form and of the Applicant's signature are acceptable.
- The Applicant may be contacted to verify the authenticity of this request.

1. Person requesting the employment reference

Name of Owner/Agent ____________________________________________

Address ________________________________________________________ Unit # ________

City __________________________________________________________ State ______ Zip ________

Phone number (______) __________________ Fax number (______) __________________

2. Authorization by rental Applicant for the release of information

I hereby authorize the release of the information requested on this Employment Verification Request to the Owner/Agent listed above. I hereby acknowledge that the Owner/Agent can make copies of this executed page in order to obtain the information requested.

Name _________________________________________________________ Phone number (______) ______________

Signature ____________________________________________ Date ________________

3. Applicant’s employment information:

☐ Present  OR  ☐ Prior Occupation (check one)

Employer Name ______________________________________________________

Employer Address ______________________________________________________

City __________________________________________________________ State ______ Zip ________

Supervisor’s Name and Phone Number _____________________________ Phone number (______) __________________

Beginning and Ending Dates of Employment ________________________________

Current Gross Income (if applicable) $______________

4. Employment information verified by former or current Employer

Is the information provided in Section 3 above correct?

☐ Present  ☐ Prior Occupation (check one)  ☐ Yes  ☐ No

Employer Name  ☐ Yes  ☐ No

Employer Address  ☐ Yes  ☐ No

Supervisor’s Name and Phone Number  ☐ Yes  ☐ No

Beginning and Ending Dates of Employment  ☐ Yes  ☐ No

Current Gross Income (if applicable)  ☐ Yes  ☐ No

If No, please explain: ____________________________________________________________

Please mail or fax this form to the person listed in section 1 as soon as possible (within 24-48 hours)