Verification of Employment

Affordable Homeownership Program

APPLICANT TO COMPLETE THIS SECTION

Applicant Name: _____ SS# ___ ___ ___ ___ (last 4 digits)

Address: _____ Email: _____

Phone #: _____

Employer: _____ HR Contact: _____

Phone #: _____ Email: _____

****APPLICANT CONSENT TO RELEASE INFORMATION**:** My signature below authorizes verification of my employment information. *I certify that this verification has been sent directly to the employer and was not hand-carried by the applicant/resident or any other interested party.*

Applicant: _____ **Date:** _____

EMPLOYER TO COMPLETE THIS SECTION

The above Applicant/Resident is applying to/participating in a housing program that requires verification of income. The individual has signed a release above giving you permission to supply us with information. The information provided will remain confidential. Please return the completed form to:

Return to: Denver Department of Housing Stability – affordablehousing@denvergov.org

Employee Name: _____ Title: _____ Current Employee YES__ NO __

Date of Hire: _____ Date of Termination: _____ Is employment considered Seasonal YES__ NO __

Pay Schedule is: Weekly___ Bi-weekly___ Bi-monthly___ Monthly___ Annually___

Base Pay/Hourly Rate: $_____ paid: Hourly___ Weekly___ Monthly___ Annually___

Regular Hours Worked Per Week: _____

Overtime Rate Per Hour $_____ Average Overtime Hours Per Week: _____ N/A ____

Shift Differential Rate Per Hour: $_____ Shift Differential Hours Per Week: _____ N/A ____

Year to Date Earnings: $_____ YTD Period _____ to _____

(1st day of the 1st pay period of the year) *(Last day of the last pay period)*

Does the employee receive- (check all that apply) Bonuses: ___Commission___Tips___Incentives___NONE___

Average Bonuses, Tips, Commission: $_____ Weekly _____ Monthly _____Quarterly _____ Annually _____

Is there an anticipated pay increase in the next 12 months? ___Yes ___No

If YES, estimated amount $_____ of pay increase. What is the effective date of the increase: _____

WARNING: Section 1001 of Title 18 of the U.S. Code make it a criminal offense to make willful, false statements of misrepresentation to any Department or Agency of the U.S. as to any matter within its jurisdiction. I hereby certification that the information provided above is accurate and complete to the best of my knowledge.

_____

Signature of Employer Representative Print Name Date

_____

Title Email Phone Number

EQUAL HOUSING OPPORTUNITY

CCD 12-8-23