

DOCUMENTATION of TELEPHONE VERIFICATION

Applicant/Resident: _____

Unit #: _____

- Oral (telephone) verifications may be used when other methods are not feasible. Describe the reason(s) that third-party written or first-hand verifications are not feasible in this instance:

- In lieu of third-party written or first-hand verifications, on _____, at _____,
(Date) (Time)
 I spoke with _____, _____, at _____.
(Contact Person) (Title) (Name of Employer)

Employee Name: _____

Job Title: _____

Presently Employed: Yes ___ Date Employed _____ No ___ Last Day of Employment: _____

Current Wages/Salary: \$ _____ per: hour week month year other _____ (circle one)

Average # of regular hours per week: _____ Year-to-date earnings: \$ _____ thru ____/____/____

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: \$ _____ per: hour week month year other _____ (circle one)

List any anticipated change in the employee's rate of pay within the next 12 months: _____

- Additional remarks:

WARNING: Section 1001 of Title 18 of the U.S. Code makes it a criminal offense to willfully falsify a material fact or make a false statement in any matter within the jurisdiction of a federal agency.