

# TERMINATION OF EMPLOYMENT VERIFICATION

To: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_ has applied for residency (or is a resident) at \_\_\_\_\_. As part of our processing, it is necessary that we obtain verification of his/her employment and anticipated Gross Annual Income. The applicant/resident hereby authorizes the release of information regarding his/her former employment and income.

Please complete the section below and return by fax to \_\_\_\_\_ or by e-mail \_\_\_\_\_. (Please e-mail rather than have the above individual hand deliver.) Thank you in advance for your prompt attention.

\_\_\_\_\_  
Printed Name of Applicant/Resident

\_\_\_\_\_  
Printed Name of Manager

\_\_\_\_\_  
Signature of Applicant/Resident

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Manager

\_\_\_\_\_  
Date

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Manager's Phone Number

## THE FOLLOWING TO BE COMPLETED BY FORMER EMPLOYER:

Date of termination: \_\_\_\_\_

Last day actually worked: \_\_\_\_\_

Reason for termination: ( ) Employee quit. ( ) Other \_\_\_\_\_

Do you anticipate rehiring this former employee? \_\_\_\_ YES \_\_\_\_ NO. If YES, when? \_\_\_\_\_

Is former employee eligible for Unemployment Benefits? \_\_\_\_ YES \_\_\_\_ NO

Will the former employee receive Workman's Compensation? \_\_\_\_ YES \_\_\_\_ NO

If YES, provide the name and address of the company through which this can be verified:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Will the former employee receive a Pension? \_\_\_\_ YES \_\_\_\_ NO

If YES, provide the name and address of the company through which this can be verified:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Printed Name of Authorized Representative

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone Number

**Warning:** Title 18, Section 1001 of the U.S. Code states that a person is guilty of a felony for knowingly and willingly making false or fraudulent statements to any department of the United States Government. HUD and any owner (or an employee of HUD or the owner) may be subject to penalties for unauthorized disclosures or improper uses of information collected based on the consent form. Use of the information collected based on this verification form is restricted to the purposes cited above. Any person who knowingly or willingly requests, obtains, or discloses any information under false pretenses concerning an applicant of participant may be subject to a misdemeanor and fined not more than \$5,000. Any applicant or participant affected by negligent disclosure of information may bring civil action for damages and seek other relief, as may be appropriate, against the officer or employee of HUD or the owner responsible for the unauthorized disclosure or improper use. Penalty provisions for misusing the social security number are contained in the Social Security Act at 208(a)(6), (7) and (8). Violations of these provisions are cited as violations of 42USC 408(a), (6), (7) and (8).