

**EMPLOYMENT VERIFICATION**

(MMR – A)

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DATE: \_\_\_\_\_

RE: \_\_\_\_\_

**FROM: Foxfire at Valley Lakes Apartments  
2121 Kyra Drive  
Lafayette, IN 47909  
Ph. (765)447.2121 Fax (765)447.8787**

In order to comply with our regulations requesting verification of all income, please complete the following information and return as soon as possible to the above address in the envelope provided. Thank you.

**I hereby authorize release of any information requested by Monarch Management & Realty, Inc. or it's managers and agents regarding my income, assets and allowances.**

\_\_\_\_\_  
**Applicant/Resident Signature**

\_\_\_\_\_  
**Date**

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

**TO BE COMPLETED BY EMPLOYER: [LEAVE NO LINES BLANK]**

1. Date of Hire: \_\_\_\_\_
2. Has Employment been Continuous: \_\_\_\_\_
3. Rate of Pay: \_\_\_\_\_ per \_\_\_\_\_ {hour/day/week/month/year (circle one)}
4. Average regular hours worked per week: \_\_\_\_\_
5. Is Employment Seasonal? (Other than 52 weeks/year): yes / no. If yes, how many weeks? \_\_\_\_\_
6. If Pay Rate is other than Salary, Rate of Overtime Pay: \_\_\_\_\_ per hour.
7. Average overtime hours per week: \_\_\_\_\_
8. Other compensation (Tips/Meals/Commission/Bonus/Etc.) \_\_\_\_\_ (estimated per week)
9. Anticipated date next raise expected: \_\_\_\_\_
10. Anticipated rate of increase: \_\_\_\_\_

REMARKS:

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

Signature of Person  
Verifying Information: \_\_\_\_\_ Title: \_\_\_\_\_

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