

Employment Verification Form:

ManageCo PO Box 526109 SLC UT 84152-6109
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Email: documents@manageco.com



Employment Information Release:

I _____ (print your name here), authorize and request _____ (Name of your Employer) to release any information requested by ManageCo and/or its affiliates concerning my past or current employment.

Thank you in advance for quickly completing and returning this form to ManageCo.

Applicant (Employee) Signature: _____ **Date:** _____

TO BE COMPLETED BY EMPLOYER

Please complete the form below and send it to our office as soon as possible.

1. How long has the above named Employee been employed with you? _____
2. What is their gross monthly income? \$ _____ /mo.
3. Is there overtime?..... YES [] NO []
Does the above figure include overtime?..... YES [] NO []
4. What are their chances of continued employment? _____
5. Any seasonal layoffs expected?..... YES [] NO []
6. Is the employee currently on any type of leave of absence?..... YES [] NO []
 - a. If 'YES', is leave paid or unpaid?.....PAID [] UNPAID []
 - b. If on leave, expected date of return? _____

Any Additional Comments:

By signing I additionally certify that you have authority to sign for the Employer:

Signed by: _____ Title: _____

Printed Name: _____ Date: _____ Phone: _____

Company Name: _____