



# Verification of Employment

Denver Affordable Housing Program

201 W. Colfax Avenue #615 - Denver, CO 80202

(Applicant: Fill out the top portion only and give to employer to fill out the lower portion)

Applicant Name: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Employer Name: \_\_\_\_\_

Address: \_\_\_\_\_

Release:  I hereby authorize the release of the requested information

Signature: \_\_\_\_\_

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

**TO BE COMPLETED BY EMPLOYER**

**This information will be used only to determine applicant affordable housing eligibility.**

Return to: Denver Department of Housing Stability - Affordable Housing Program

via e-mail to: [affordablehousing@denvergov.org](mailto:affordablehousing@denvergov.org)

Position Held: \_\_\_\_\_

Employed From: \_\_\_\_\_

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

Employee is paid (pay period):

Weekly

Bi-Weekly

Bi-Monthly

Monthly

Other

Current rate of gross pay per pay period: \_\_\_\_\_

\$

Average hours worked per pay period: \_\_\_\_\_

Overtime rate per hour: \_\_\_\_\_

\$

Average hours of overtime per pay period: \_\_\_\_\_

Tips per pay period (estimate): \_\_\_\_\_

\$

Commissions earned per pay period (estimate)\*: \_\_\_\_\_

\$

Is pay received for vacation?

Yes

No

# of vacation days per year: \_\_\_\_\_

Is pay likely to increase in the next 12 months?

Yes

No

Date of next pay increase: \_\_\_\_\_

Date of last pay increase: \_\_\_\_\_

Probability of continued employment

High

Low

Don't Know

Authorized Signature of Employer: \_\_\_\_\_

Name: \_\_\_\_\_

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

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Please contact the Denver Department of Housing Stability at 720/913-1634 or via e-mail to [affordablehousing@denvergov.org](mailto:affordablehousing@denvergov.org) if you have any questions regarding this form.