**PRINTABLE EMPLOYEE VERIFICATION**

|  |  |
| --- | --- |
| **EMPLOYER INFO** | |
| **COMPANY NAME** |  |
| **ADDRESS** |  |
|  |  |
| **EMPLOYEE INFO** | |
| **EMPLOYEE NAME** |  |
| **HIRE DATE** |  |
| **END DATE *if applicable*** |  |
| **RATE OF PAY** |  |
| **FREQUENCY OF PAY** |  |
| **TITLE HELD** |  |
| **ROLES AND RESPONSIBILITIES** |  |
| **ELIGIBLE FOR REHIRE?** |  |
| **ADDITIONAL COMMENTS** |  |
|  |  |
| **REQUESTING PARTY INFO** | |
| **REQUESTOR NAME** |  |
| **REQUESTOR  CONTACT INFO** |  |
|  |  |
| **FORM COMPLETED BY** | |
| **NAME** |  |
| **CONTACT  INFO** |  |
| **DATE COMPLETED** |  |
| **SIGNATURE** |  |