



601 Hill Point Boulevard, #161
 Suffolk, Virginia 23434
 (757) 923-2700/ (757) 923-5200 (fax)
 Hillpointwoods@charterinternet.com
 www.Hillpointwoods.com



VERIFICATION OF EMPLOYMENT

This will authorize (Employer) _____ to release the information requested below regarding my employment.

 Full Name (Type or Print)

 Social Security Number

 Signature of Applicant

 Street Address

 Date

 City, State, Zip Code

To Whom It May Concern:

The individual named above is an applicant for housing at **HillPoint Woods Apartments**. The information requested below will be held in strict confidence as is required under the provisions of the Virginia Privacy Protection Act, and will be used only to determine the eligibility of the individual for housing. Thank you for your cooperation in completing those applicable portions of this inquiry.

1. Date of Employment _____ Occupation _____
2. Anticipated gross annual earnings (over the next 12 months) \$ _____
3. Estimated annual amount for overtime \$ _____
4. Annual income from bonus, tips, commission, etc... \$ _____
5. Nature of Employment: Permanent _____ Temporary _____ Seasonal _____ Part-time _____
6. Probability of continued employment _____
7. Additional comments: _____

 Employer Signature/Title

 Date

 Name of Employer