

VERIFICATION OF EMPLOYMENT

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This Verification of Employment (this "Letter") is issued as of [DATE] by [EMPLOYER LEGAL NAME], located at [EMPLOYER ADDRESS] (the "Employer" or "Company"), concerning [EMPLOYEE FULL NAME] (the "Employee"), and is addressed to [REQUESTING PARTY / "To Whom It May Concern"] (the "Requesting Party").

The Employer, the Employee, and the Requesting Party are each a "Party" for purposes of this Letter.

Recitals. The Requesting Party has asked the Employer to confirm certain facts about the Employee's employment, typically in connection with a [LOAN, LEASE, BACKGROUND CHECK, IMMIGRATION, OR BENEFITS APPLICATION]. The Employee has authorized the Employer to release the information below. The Employer issues this Letter to confirm those facts accurately and in good faith, subject to applicable privacy law.

1. Parties and Authorization

1.1 Employer. The Employer is [EMPLOYER LEGAL NAME]. The person completing this Letter on the Employer's behalf is [NAME], [TITLE, e.g. HR Manager], reachable at [PHONE] and [EMAIL].

1.2 Employee. This Letter concerns [EMPLOYEE FULL NAME], whose identifying reference for this verification is [EMPLOYEE ID / LAST FOUR OF SSN, if permitted and necessary].

1.3 Authorization. The Employee has signed an authorization, dated [DATE], consenting to the release of the information in this Letter to the Requesting Party. A copy of that authorization is [attached / on file with the Employer].

1.4 Purpose limitation. The information in this Letter is provided solely for the stated purpose and should not be used for any other purpose.

2. Confirmation of Employment Status

2.1 Employment confirmed. The Employer confirms that the Employee [is currently employed by / was formerly employed by] the Company.

2.2 Dates of employment. The Employee's start date is [START DATE], and, if employment has ended, the end date is [END DATE / "N/A — currently employed"].

2.3 Status. The Employee's employment status is [full-time / part-time / seasonal / temporary] and [active / inactive / on leave] as of the date of this Letter.

3. Position and Duties

3.1 Job title. The Employee's current or most recent job title is [JOB TITLE].

3.2 Department and supervisor. The Employee works or worked in the [DEPARTMENT] and reports or reported to [SUPERVISOR NAME / TITLE].

3.3 Nature of work. The Employee's general responsibilities are or were [BRIEF DESCRIPTION OF DUTIES].

3.4 Employment history with the Company. During employment, the Employee [held a single position throughout / was promoted from [PRIOR TITLE] to the current title on [DATE]], as recorded in the Company's records.

4. Compensation

4.1 Rate of pay. The Employer confirms the Employee's compensation as [\$AMOUNT per hour / per year], [before / after] taxes and deductions.

4.2 Pay frequency. The Employee is or was paid on a [weekly / biweekly / semimonthly / monthly] basis.

4.3 Additional compensation. The Employee [is / is not] eligible for [overtime, bonus, or commission]. Where applicable, the typical additional amount is [AMOUNT / RANGE, or "varies"].

4.4 Year-to-date and prior-year earnings. [OPTIONAL — for lending: The Employee's year-to-date gross earnings are approximately \$[AMOUNT], and prior-year gross earnings were approximately \$[AMOUNT], as recorded in the Company's payroll system.]

4.5 Verification limits. The Employer verifies compensation only as recorded in its payroll system and makes no representation about the Employee's future earnings.

5. Hours and Schedule

5.1 Scheduled hours. The Employee's scheduled hours are approximately [NUMBER] hours per week.

5.2 Probability of continued employment. [OPTIONAL — for lending: The Employer considers the Employee's continued employment to be [likely / not determinable]. The Employer makes no guarantee of continued employment, which, where applicable, is at will.]

5.3 Leave status. If the Employee is on leave, the expected return date is [DATE / "not determined"].

5.4 Overtime and variability. Where the Employee's hours or earnings vary, the Employer notes that actual hours worked may differ from the scheduled figure above, and any overtime or variable pay is reflected in the Company's payroll records rather than guaranteed for any future period.

6. Limitations and Disclaimers

6.1 Accuracy. The information in this Letter is accurate to the best of the Employer's records as of the date of this Letter.

6.2 No guarantee of continued employment. Nothing in this Letter is a promise or guarantee of continued employment or future compensation. Where applicable, employment is at will and may be ended by either Party consistent with law.

6.3 Privacy compliance. The Employer provides only information the Employee has authorized and that applicable privacy and employment laws permit it to disclose. Such laws vary by jurisdiction and control where they impose restrictions.

6.4 No additional representations. The Employer makes no representations beyond the specific facts confirmed in this Letter.

7. Reliance and Use

7.1 **Intended recipient.** This Letter is intended only for the Requesting Party and only for the stated purpose.

7.2 **No third-party rights.** No person other than the Requesting Party may rely on this Letter, and it creates no rights in any third party.

7.3 **Questions.** The Requesting Party may verify or clarify the information by contacting the Employer representative named in Section 1.1.

8. Signature

8.1 **Certification.** The undersigned certifies that they are authorized to issue this Letter on the Employer's behalf and that the information is accurate to the best of the Employer's records.

8.2 **Execution.** The Employer representative signs below. The Employee may also sign to confirm authorization for the release of this information.

| EMPLOYER REPRESENTATIVE | EMPLOYEE (AUTHORIZATION) |
|---------------------------------|------------------------------------|
| Signature: _____ | Signature: _____ |
| Printed name: [NAME] | Printed name: [EMPLOYEE FULL NAME] |
| Title: [TITLE, e.g. HR Manager] | Title: [N/A] |
| Date: _____ | Date: _____ |

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