

# PRINTABLE EMPLOYEE VERIFICATION

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## EMPLOYER INFO

COMPANY NAME	
ADDRESS	

## EMPLOYEE INFO

EMPLOYEE NAME	
HIRE DATE	
END DATE <i>if applicable</i>	
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	

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