

Verification of Employment

Real Broker, LLC

Name of Company:

Company Address:

City, State, ZIP Code:

Company Phone Number:

Employer's Email Address:

This letter is to confirm the employment of _____ . Please fill in the details below.

I HEREBY AUTHORIZE MY EMPLOYER TO RELEASE INFORMATION REQUESTED BELOW:

Employee Signature:

Date:

↓ To be filled out by employer ↓

Employee Information:

- **Name:** _____
- **Job Title:** _____
- **Employment Start Date:** _____
- **Employment Status (full-time/part-time):** _____
- **Annual Salary/Hourly Wage:** _____
- **Gross Monthly Income:** _____
- **Typical Weekly Hours:** _____

Name of person completing form:

Title of person completing form:
