



# AFFIDAVIT FOR PURPOSES OF VERIFICATION OF EMPLOYMENT

I, \_\_\_\_\_ with SSN or Employee ID \_\_\_\_\_ being of full age, and being duly sworn according to law, upon my oath, state the following:

1. I declare that I was employed by the following company:

\_\_\_\_\_.

2. I declare this employment began on \_\_\_\_\_ and ended on \_\_\_\_\_.  
MM/DD/YEAR MM/DD/YEAR

3. I declare this employment was on a \_\_\_\_\_ basis working \_\_\_\_\_ hours per week.  
FULL-TIME / PART-TIME

4. I declare the position title was \_\_\_\_\_ and the major responsibilities included \_\_\_\_\_

\_\_\_\_\_.

5. I declare that I held the following certificates, licenses or other certification during this employment: \_\_\_\_\_ . *For driving positions only: I*

declare that a CDL license \_\_\_\_\_ required.  
WAS / WAS NOT

6. I declare that I \_\_\_\_\_ under contract during this employment.  
WAS / WAS NOT

7. I am unable to verify this period of employment using the Verification of Work Experience form because:

- \_\_\_\_\_ The company is out of business.
- \_\_\_\_\_ The company uses a verification service to verify previous employment.  
**Note: Must be accompanied by a letter on company letterhead stating that they use a verification service for employment verification.**
- \_\_\_\_\_ I was self-employed and this is the most appropriate way to verify my employment.
- \_\_\_\_\_ Contact with my previous employer is not possible for the following reason:  
\_\_\_\_\_

Other - please explain: \_\_\_\_\_

**I declare that, to the best of my knowledge and belief, the information herein is true, correct, and complete.**

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Address

To be completed by Notary:

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Signature