

YUKON HOUSING CORPORATION VERIFICATION OF EMPLOYMENT

CONFIDENTIAL

To be completed and signed by your employer			
Name of employer			
Employee's name			
Employee's address			
Date employment commenced		Present position title	
YYYY/MM/DD			
Gross earning for previous year		Present regular salary or wage rate	
☐ Permanent ☐ Term ☐ Other:		☐ Full-time ☐ Part-time ☐ Seasonal	
Employee on probation?	Number of hours worked per	week	Number of weeks worked per year
Details of additional earnings: overtime work, bonuses, commissions etc. (state whether or not included in above wage):			
Other remarks:			
Prospects of continued employment:			
Employer signature certifying that the above information is true and correct:			
Signature:		Title:	
Print name:		Date: YYYY/MM/DD	
Contact number:			

Personal information is collected directly under Section 15(c)(i) and indirectly under Section 16(2)(a) of the Access to Information and Protection of Privacy Act, for the purposes of the specific funding program. For further information, contact the Director, Finance and Risk Management Branch at (867) 667-5712, toll free, within Yukon 1-800-661-0408, or in person at 410 Jarvis Street, Whitehorse YT, Y1A 2H5.