Please return form directly to the Housing Department housing@tetoncountywy.gov



AFFIDAVIT FOR PREVIOUS EMPLOYMENT

Your employee has applied for housing with the Jackson/Teton County Affordable Housing Department. To receive additional entries into the weighted drawing, applicants must prove continuous years of employment. This form is very important to both your former employee and the Jackson/Teton County Affordable Housing Department. Please provide the following information as completely and accurately as possible.

Business N	lame:			
Business Phone #:Author		Authorized agents' email	rized agents' email	
Employee'	s Name			
<u>Employme</u>	ent History: Please con	nplete the following information as accurat	ely as possible.	
Enter gross	s amount paid for app	licable years: Annual Hours Worl	<u>ked:</u>	
		Reg Hours OT Hours how	urly wage or salary	
2021 \$				
2020 \$				
2019 \$				
2018 \$				
2017 \$_				
2016 \$_		 _		
2015 \$		 _ _		
2014 \$		 _		
2013 \$		 _ _		
2012 \$				
Was all emp	oloyment listed located w	vithin Teton County, Wyoming ?Yes	No	
Date of Hir	·e:	Date of Termination:		
Position de	escription:			
Additional	comments:			
Authorized Agent (print)		Title		
Signature		Date		