

EMPLOYMENT INQUIRY

DATE: _____

TO: _____
(Employer's Name and address)

SUBJECT: _____
(Employee's Name and address)

The person named above is an applicant for a Federal Home Loan Bank (FHLB) forgivable housing loan administered through the Northeast South Dakota Community Action Program (NESDCAP). The information requested below is for the purpose of determining eligibility and will be kept in STRICT CONFIDENCE. Thank you for your cooperation in returning this form by _____, 20__ to the following address or FAX:

Sincerely
Jared Groos
Jared Groos

FHLB Coordinator
NESDCAP
104 Ash St. E.
Sisseton SD 57262
FAX - 605-698-3038

I hereby authorize my employer to release the requested information.

(Signature of Applicant) (Date)

PRESENTLY EMPLOYED-To be completed by Employer

- 1. Date of employment: _____ 2. Present Position: _____
- 3. Probability of Continued employment: _____
- 4. Current Gross Base Pay (Enter Amount and Check Period)
 Annual Hourly
 Monthly Weekly Other (Specify)

5. Gross Earnings

Type	Year to Date	Past Year	Past Year
Base Pay	Thru _____ \$ _____	\$ _____	\$ _____
Overtime	\$ _____	\$ _____	\$ _____
Commissions	\$ _____	\$ _____	\$ _____
Bonus	\$ _____	\$ _____	\$ _____
Total	\$ _____	\$ _____	\$ _____

- 6. If Overtime or bonus is applicable, is its continuance likely?
Overtime Yes No
Bonus Yes No

- 7. If paid hourly - average hours per week: _____ Hrs/week
- 8. Date of applicant's next pay increase: _____
- 9. Project amount of next pay increase: _____
- 10. Date of applicant's last pay increase: _____
- 11. Amount of last pay increase: _____

DATE: _____
Telephone No. _____

Signature of Employer: _____
Title: _____

EQUAL HOUSING OPPORTUNITY