VA OMB Control No. 2900-0521 USDA OMB Approval No. 0575-0009 Respondent Burden: 10 minutes

Department of Veterans Affairs

REQUEST FOR VERIFICATION OF EMPLOYMENT

Privacy Act Notice: VA will not disclose information collected on this form to any source other than what has been authorized under the Privacy Act of 1974 or Title 38, Code of Federal Regulations 1.576 for routine uses (i.e., information verifying an applicant's employment may be disclosed to a prospective mortgagee proposing to make a guaranteed loan on the veteran applicant's behalf) as identified in the VA system of records, 55VA26, Loan Guaranty Home, Condominium and Manufactured Home Loan Applicant Records, Specially Adapted Housing Applicant Records and Vendee Loan Applicant Records - VA, published in the Federal Register. Your obligation to respond is voluntary, but failure to provide requested information could impede processing.

Respondent Burden: We need this information to help determine a veteran's qualifications for a VA-guaranteed loan. Title 38, United States Code, allows us to ask for this information. We estimate that you will need an average of 10 minutes to review the instructions, find the information, and complete this form. VA cannot conduct or sponsor a collection of information unless a valid OMB control number is displayed. You are not required to respond to a collection of information if this number is not displayed. Valid OMB control numbers can be located on the OMB Internet Page at www.reginfo.gov/public//do/PRAMain. If desired, you can call 1-800-827-1000 to get information on where to send comments or suggestions about this form.

Lender or Local Processing Agency (LPA) completes Items 1 through 6 and has the applicant sign in Item 7. Forward the completed form directly to the employer

named in Item 1. Employer completes eith	er parts	s II and	IV or r	oarts III	and IV. Return t	the form direc	tly to the lender	or local proc	essin	g agency named in Ite	m 3 of pa	rt I.		
zamprojer compreses cran	or para	, 11 4114	1. 01 p	74110 111			ST CERTIFIC		•	g agency named in 100	ar or pu			
1. NAME AND ADDRESS				2. NAME AND ADDRESS OF APPLICANT										
3. NAME AND ADDRESS	OF LEN	NDER C	R LOC	AL PRO	DCESSING AGEN	NT (LPA)								
I CERTIFY THAT this	verifica	ation ha	s been	sent dir	ectly to the empl	loyer and has	not passed throu	gh the hands	of th	e applicant or any other	er interest	ed pa	irty.	
4A. SIGNATURE OF LEND			-	4B. TITLE OF LENDER, OFFICIAL OF LPA, OR USDA LOAN PACKAGER										
5. DATE				6. VA OR USDA NO.										
I have applied for a mor loan and stated that I am signature in the block au employment information	n/was en uthorize	mploye	d by yo	ou. My	7. APPLICAN	NT'S SIGNATI	URE AND EMPLO	DYEE IDENT	TFICA	TION				
				PAI	RT II - VERIF	ICATION (OF PRESENT	EMPLOY	MEI	NT				
8. PRESENT POSITION		9. DATE O		IENT	10. PROBABILITY OF CONTINUED EMPLOYMENT			YES T	NO NO	11B. IS OVERTIME/BO OVERTIME YES NO	ONUS LIK	BON		
12. CURRENT 🔊				NTHLY	WEEKLY [HOURLY	L			XABLE PAY (For Milita	rv Person			
12. CURRENT ANNUAL MONT BASE PAY OTHER (Specify)			NIIILI	Y WEEKLY HOURL					CAREER C PAY PRO PAY					
13A. BASE EARNINGS YEAR-TO-DATE PAST YEAR					₹		\$		\$	\$		\$		
\$ \$			\$				FLIGHT PAY		ОТН	OTHER (Specify)				
13B. OVERTIME YEAR-TO-DATE PAST			T YEAR	₹		\$ \$		\$	\$					
\$ \$						14B. MONTHLY N			NONTAXABLE PAY (For Military Personnel Only)					
13C. COMMISSION YEAR-TO-DATE			PAS	ST YEAR	₹		QUARTERS			VHA		CLOTHING		
\$			\$				\$		\$	1		\$		
13D. BONUSES YEAR-TO-DATE				ST YEAR	₹		RATIONS		OTH	IER (Specify)				
\$ \$ \$ 15. REMARKS: IF PAID HOURLY, PLEASE INDICATE					A)/EDAOE HOUE	20 WORKER	S S S S S S S S S S S S S S S S S S S			NT AND DAGT VEAD				
15. REMARKS: IF PAID H	OURLY	, PLEA	2E IND	ICATE A	AVERAGE HOUF	45 WORKED	EACH WEEK DU	KING CURR	ENI	AND PAST YEAR				
				PAR	RT III - VERIFI	ICATION C	F PREVIOUS	S EMPLO	YME	NT				
16. SALARY/WAGE AT TERMINATION: YEARLY MONTHLY WEEK				BASE F	PAY	S SVERTIME		\$	COMMISSIONS \$		BONUS \$			
17. DATES OF EMPLOYMENT				1	18. REASONS FOR LEAVING									
FROM TO 19. POSITION HELD														
PART IV - CERTIF conspiracy purposed	FICAT to infl	ION uence	Federa the iss	al statu uance (ates provide se	evere penalt	ies for any france by VA or US	ud, intention	onal nistra	misrepresentation, outors.	or crimin	nal c	onnivance or	
20. SIGNATURE						21. TITLE O	EMPLOYER		2	22. EMPLOYER'S TELEPHONE NO. (Include Area Code)		23. [DATE	