

PROOF OF EMPLOYMENT

PART I. APPLICANT INFORMATION — TO BE COMPLETED BY APPLICANT			
Name:		Employer:	
Address:			
PART II. EMPLOYER VERIFICATION — TO BE COMPLETED BY SUPERVISOR OR MANAGER.			
The individual named above is employed at:			
Please confirm their employment status below:			
Employee position title:			
Employment start date:			
	_		
Position title:			
By signing this document, I acknowledge that the information above is accurate and that I hired this person to work in a tourism position.			
Employ	er Name	Employer Signature	Date