

**Kentucky Housing Corporation  
Unemployment Bridge Loan Program  
Verification of Employment Form**

Employee Name:	Last 4 Social Security Number:
Employer Name:	Employer Address
Employer Phone Number:	Contact Person/Title:
Phone Number Verified By: <input type="checkbox"/> Directory Assistance <input type="checkbox"/> Telephone Book <input type="checkbox"/> Other: _____	
Employment: <input type="checkbox"/> Present <input type="checkbox"/> Previous	
Start Date:	End Date:
<p>The undersigned confirmed the borrower's dates of employment by telephone.</p> <p>Counselor Signature: _____</p> <p>Counselor Email: _____</p> <p>Date: _____              Counseling Agency: _____</p>	