

**THE BALTIMOREAN APARTMENTS**  
2905 N. Charles Street  
Baltimore, MD 21218  
(410) 889-4157 Fax (410) 889-4158

REQUEST FOR EMPLOYMENT VERIFICATION

**Applicant: Please sign and date the section at the center of the page marked with a \*. Please do not fill out the rest of this form. We will send this signed form to your employer if required.**

To: \_\_\_\_\_ Date: \_\_\_\_\_

The person named below has submitted an application to us for an apartment rental. Your company was listed as having currently or formerly employed this person. The applicant, by his/her signature below, has authorized you to release their employment information. Your assistance in providing employment information will be sincerely appreciated. Thank you.

Employee Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Department or Branch: \_\_\_\_\_

Date(s) of Employment: \_\_\_\_\_

REQUEST SUBMITTED BY	TITLE	PHONE

**APPLICANT'S AUTHORIZATION OF THIS INQUIRY:  
I hereby consent to the release of my residency information.**

\* \_\_\_\_\_  
**Resident's Signature** **Date**

**EMPLOYER'S COMMENTS**

Dates of Employment: From \_\_\_\_\_ To \_\_\_\_\_

Position Held: \_\_\_\_\_

Gross Salary or Wage \$ \_\_\_\_\_ per  YEAR  MONTH  WEEK  HOUR\*

(\*If on hourly wage, please specify approximate number of hours worked weekly: \_\_\_\_\_ HOURS)

Other Comments: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE: \_\_\_\_\_ TITLE: \_\_\_\_\_ DATE: \_\_\_\_\_