

CASPER RENTAL AGENCY

800 Antler Drive

Casper, WY 82601

Telephone: (307) 234-0006

Facsimile: (307) 234-1923

MUST BE TURNED IN NO LATER THAN: _____

EMPLOYMENT HISTORY REQUEST

Date: _____

Employer's Name: _____

Phone: _____ Fax: _____

Address Requested: _____

Casper Rental Agency will not use the information provided for credit granting purposes as define under the Federal Trade Commission's privacy rule (i.e. information will only be used in deciding whether to least to the prospective resident).

Printed name of Prospective Resident: _____

Signature of Prospective Resident: _____

Social Security Number (if applicable): _____

By signing this employment request, I give my employer full permission to release all information that is requested of any employer to Casper Rental Agency.

PLEASE ANSWER the following questions. The information may be faxed back to us.

1. How long has the employee worked with the company? _____

2. How much does the employee make per hour? _____

3. How many hours a week does the employee work? _____

4. Is the employee full-time or part-time? _____

5. Is the work seasonal at times? _____. If yes, when? _____ How long? _____

6. Is the employee punctual? _____

7. Other information we should know? _____

Date: _____

Printed name of Manager/Supervisor/H.R.

By:

Signature of Manager/Supervisor/H.R.