

NON-EMPLOYMENT AFFIDAVIT

To be completed by any adult household member, including emancipated minors, who claim no employment income.

TENANT/APPLICANT: _____ UNIT NO: _____

DEVELOPMENT NAME: _____

DIRECTIONS: Please select all that applies and attach the printout from Idaho Dept. of Labor to show the existence or lack of unemployment benefits and wage history for the last twelve months preceding the certification.

1. I am not currently employed in any capacity and do not anticipate the change in my status. (Please check all that applies)
- I am not seeking employment.
 - I have not recently applied for employment.
 - I have not been offered employment.
 - I am not under any affirmative obligation to obtain employment.
 - I do not plan to look for employment due to: _____

2. I am not currently employed in any capacity; however, I anticipate becoming employed in the next 12 months.
- A. (Check one)
- I have been offered a position with _____ (employer) that will begin _____ (date)
 - I am seeking employment as a _____ (position) and I anticipate earning \$ _____ per _____ (frequency).

- B. My anticipated income is supported by (check all that applies):
- Written confirmation from my new employer
 - Previous tax return
 - Previous job pay stub/ salary history
 - Three current employment advertisements showing average compensation for a similar position
 - Other: _____

3. I attest that the following is true regarding benefits related to my unemployment:
- A. (Please check one)
- I am currently receiving unemployment benefits or other benefits related to my non-employment status.
 - I am not currently receiving and do anticipate receiving unemployment benefits or other benefits.
 - I am not currently receiving and do not anticipate receiving unemployment benefits or other benefits.

B. If benefits related to your unemployment status (i.e. disability) other than unemployment is being received, please identify source: _____ and amount \$ _____.

Under penalty of perjury, I certify that the information presented in this affidavit is true and accurate to the best of my knowledge. I further understand that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the termination of my lease agreement.

Tenant/ Applicant Signature

Date

WARNING: Section 1001 of Title 18 U.S. Code makes it a criminal offense to willfully falsify a material fact or make a false statement in any matter within the jurisdiction of a federal agency.