

# NON-EMPLOYMENT AFFIDAVIT

To be completed by any adult household member, including emancipated minors, who claim non-employment status and/or income.

TENANT/APPLICANT: \_\_\_\_\_ UNIT NO: \_\_\_\_\_

DEVELOPMENT NAME: \_\_\_\_\_

**DIRECTIONS: Please select all that applies.**

**1. I am not currently employed in any capacity and do not anticipate the change in my status.**  
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.** (Please check one)

A.  I have been offered a position with \_\_\_\_\_ (employer) that will begin \_\_\_\_\_ (date)

B.  I am seeking employment as a \_\_\_\_\_ (position) and I anticipate earning \$ \_\_\_\_\_ per \_\_\_\_\_ (frequency).  
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:** (Please check one)

I am currently receiving unemployment benefits. (**Attach printout from MDES of unemployment benefits.**)

I am currently receiving other benefits related to my non-employment status (i.e. disability).  
Identify source: \_\_\_\_\_ and amount \$ \_\_\_\_\_.

I am not currently receiving but do **anticipate** receiving unemployment benefits or other benefits.  
If benefits related to your unemployment status (disability, pension, etc.) other than unemployment is anticipated,  
Identify source: \_\_\_\_\_ and amount \$ \_\_\_\_\_.

I am not currently receiving and do **not** anticipate receiving unemployment benefits or other benefits.

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.**