# **CONFIRMATION OF INCOME FROM EMPLOYMENT**



## **Employer's information**

| Name             |                             |  |
|------------------|-----------------------------|--|
| Company Reg. No. | Registered office (address) |  |

### **Employee's information**

| Name          | Surname | Title |  |
|---------------|---------|-------|--|
| Date of birth |         |       |  |

#### Information on employee - applicant employment relationship

| Current job title               |         |               |           |   |
|---------------------------------|---------|---------------|-----------|---|
| Commencement date of employment |         |               |           |   |
| Employment is agreed for:       |         |               | 🗌 indefin | ite period 🗌 definite period until:             |
| Employment type:                | employ  | ment contract | agreem    | ent to complete a job agreement to perform work |
| Payment of wage:                | in cash | I             | sent to   | account   |
| In probationary period          | no      |               | yes       | Number of supported children:                   |
| In notice period:               | no      |               | gyes      |   |

#### Average net monthly income incl. any sickness benefits - Currency

| in the last 3 months, i.e. from to  |  |  |  |  |
|---|--|--|--|--|
| in the last 12 months, i.e. from to   |  |  |  |  |
| Average net monthly travel allowances for meals/increased living costs for the last 12 months, i.e. |  |  |  |  |
| to  |  |  |  |  |

Deductions in are not / in are made from work income based on the execution of a decision/agreement on deductions from wages.

| Purpose<br>of deduction |  | Deduction<br>amount<br>- Currency |  |
|-------------------------|--|-----------------------------------|--|
|                         |  |                                   |  |

If the income was provided by more than one employer in the last year, only the last employer fills out this Confirmation.

This confirmation has been issued by: \_\_\_\_

First name, surname, position

Contact phone: \_

In\_\_\_\_\_ on \_\_\_

Stamp and signature of confirmation issuer