



**HUMAN RESOURCES
REQUEST FOR EMPLOYMENT VERIFICATION LETTER**

In accordance with the Freedom of Information and Protection of Privacy Act (FOIPP) and Personal Information Protection Act (PIPA), Westwinds Communities must have written consent from any of the current employee or former employee, before releasing any requested employment related information to a third party. To ensure compliance with the FOIP and PIPA regulations, the employee must complete and sign this form.

EMPLOYEE NAME: _____
(First, Last)

COMMUNITY (Please select one):

- MTM HCL SSL CAO COAL TRAIL MAINTENANCE

DEPARTMENT: _____

Employment verification letter is requested for the following purposes (Please state):

Please indicate information required for Employment Verification Letter:

- Employment Status Position Title Department Hire Date
 Compensation (Permanent) Other (Please state clearly):

Phone me to pick up employment verification letter at: _____

Mail/ Fax/E-mail Employment Verification Letter to: _____

I hereby authorize Westwinds Communities to release the above requested information.

Employee's Signature: _____ Date: _____

For questions pertaining to this form please contact Patricia Norsworthy via e-mail, patricia.norsworthy@westwindscommunities.ca or Phone (403) 652-8600. Please forward completed and signed form to Patricia Norsworthy via e-mail or Inter-Office Mail.

Please allow a minimum of 4 business days for processing