Seasonal Worker Statement Instruction

**Purpose:** The purpose of this form is to find out what the intentions are or what income the resident intends to earn during the off-season.

**Specific Instructions:**

1. Enter property name and unit number.
2. Enter applicant or resident name.
3. Applicant/resident should enter how many weeks s/he will not be working in a calendar year. Income for all other weeks needs to be verified – may be from several employers.
4. Applicant/resident should check one of the boxes and fill in applicable lines.
5. Applicant/resident should sign and date.
SEASONAL WORKER STATEMENT

Property Name:  (1) _______________________________  Unit:  ____ (1) ____

Resident Name:  (2) _______________________________

I am employed as a seasonal worker. I anticipate not working  ____ (3) ____ weeks out of the year.

While I am not working, I will support myself by:  (4)

☐ Collecting unemployment. If yes, how much per week? ____________________________

☐ Living off of savings or cash on hand. **NOTE:** Savings or cash on hand must be verified.

☐ Other  ________________________________________________

______________________  _______________________
(5) Signature of Resident  (5) Date

www.wshfc.org/managers/forms-RC.htm
Seasonal Worker Statement Instruction  |  Rev. January 2009  |