Seasonal Worker Statement

**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: ___________________________ Unit: _____ (1) ______

Resident Name: ___________________________

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