



# INTERIOR WILDLAND FIRE

DOI Casual Payment Center | US Wildland Fire Service | A Service First Organization  
3833 S Development Ave Boise, Id 83705-5354 | P: 877-471-2262 | F: 208-433-6405 | CasualPay@BLM.gov

## EMPLOYMENT VERIFICATION REQUEST FORM

Check one:  BIA  BLM  FWS  NPS

NAME: \_\_\_\_\_ SSN: \_\_\_\_\_

### I would like to request my:

Year-to-Date Employment Summary for year(s): \_\_\_\_\_

*\*If no year is indicated, current year will be assumed.*

Last Wage and Earnings Statement

Other: \_\_\_\_\_

### I give my authorization to release this information to the following location(s):

Fax: \_\_\_\_\_ Attn To: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

*\*Emails will be encrypted, password: **casualpay**. Viewing on mobile device not recommended.*

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_ PHONE: \_\_\_\_\_

### APPROVING OFFICIAL / POINT OF CONTACT USE ONLY

Casual Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Year-to-Date Employment Summary for year(s): \_\_\_\_\_

Last Wage and Earnings Statement

Other: \_\_\_\_\_

Print AO or POC Name: \_\_\_\_\_

AO or POC Signature: \_\_\_\_\_ Agency Fax #: \_\_\_\_\_