

Cape Ann Emergency Relief Fund Employer Verification of Lost Wages

Action, Inc. is distributing funds raised by the Cape Ann Community for laid off hourly and tipped workers in Gloucester, Rockport, Ipswich, Essex, and Manchester, who have been furloughed, laid off or had hours reduced by at least 50%, due to the COVID-19 crisis. Please complete this form, to the best of your ability, to verify that your employee/s meet the eligibility criteria for this fund.

1. Employee Name: _____

2. Length of Employment: Years _____ Months _____ Weeks _____

3. Last date of work ___ / ___ / ___

4. Hourly rate \$ _____ and
 - a. Average number of hours per week pre COVID-19 _____
 - b. Average number of hours per week currently _____

5. Estimated tips per week \$ _____

6. Employer/Company Name _____

7. Employer signature _____ Date ___ / ___ / ___

8. Employer phone number: _____

Please note: This is a limited fund, and applications will be approved when all required documents, including this form, have been received. Your timely response will be greatly appreciated. This form can be sent back via email to: caerf@actioninc.org.