THE EMPLOYMENT AGENCY ACT PROVIDES THAT **EACH** APPLICANT LISTED PROVIDE AFFIDAVITS OF AT LEAST **TWO** REPUTABLE RESIDENTS OF THE **STATE OF NEVADA.**

AFFIDAVIT

STATE OF NEVADA,

COUNTY OF _____

_____being duly sworn deposes and says:

I reside at _____ in the city of _____
Number and street

State of NEVADA, _____.
Zip Code

County of _____ I have known the applicant _____
Applicant Name

for _____ years. I know said applicant to be a person of good moral character.
Time period known

_____
Signature of person making affidavit

Sworn to before me this_____ day of _____, 20_____.

_____
Signature of Notary Public

Persons who make Affidavits are to complete the following questions: (**Please complete in ink or typewrite.)**

Name _____Telephone No. _____

Home
Address_____
Number, Street, Apt. No. City State Zip Code

Citizen of U.S.? Yes ☐ No ☐

I have been a resident of Nevada since_____

Driver's License No. _____Expiration Date_____

Has witness been arrested (except minor traffic violations)? Yes ☐ No ☐

If yes, list arrest(s):

Date	Charge	Location	Disposition