

APPLICATION OR REVIEW OF APPLICATION FOR ATTESTATION OF EMPLOYMENT (3 YEARS)

Appendix 1

ATTESTATION OF GUARANTOR

The AMF reserves the right to request additional documents and to contact the guarantor.

Any false statement will result in the cancellation of this application and will be noted in the applicant's file.

Last name of applicant:	First name:
Client No. :	<u> </u>
Important	
You must provide an attestation of guarantor for the employer of the business (or his representative) or	e employment you currently hold. The guarantor should be the the chief human resources officer.
Name of business (in block letters)	Québec Enterprise Number (NEQ)
Name of guarantor (in block letters)	Title of guarantor (in block letters)
Telephone number of guarantor	
I declare that the applicant works full-time (a minin	num of 30 hours per week).
Position held by applicant:	
Employment period: from	to present.
Signed at	<u> </u>
This day of month	year
Signature of guarantor	

Information Centre Toll-free: 1-877-525-0337 Québec City: 418-525-0337

Montréal: 514-395-0337

dfq_attestation-emploi-3ans-annexes_January 2022

Page 1 of 2 Website: www.lautorite.qc.ca