

Verification of Employment

Shawnee Tribe CCDF Program
29 S. Hwy 69A
Miami, OK 74354
918-542-7232 / Fax 918-542-4138
E-Mail shawneechild@shawnee-tribe.com
E-Mail diana@shawnee-tribe.com

Name/ Address of Employer: _____

Phone # _____

Applicant/ Resident Name

Applicant/Resident Address

Applicant Phone #

City State Zip

The individual name above has obtained or is attempting to obtain childcare services assistance through the Shawnee Tribe. Federal regulations require that in order to for the family to remain eligible, we must verify the family's income information. The individual has authorized below your release of the requested information. We are required to complete the verification process in a short time period and would appreciate you prompt response. If you have any questions, please feel free to contact our office.
Thank you for your corporation.

I _____ hereby authorize _____
(Applicant) (Employer)
to release the information requested below regarding my employment and compensation.

Signature Date

TO BE COMPLETED BY EMPLOYER

1. Date began Employment _____ Position/ Occupation _____

2. Work Schedule (example Tue – Sat 7:30 – 4:00) _____

3. Current Rate of Pay\$ _____ per hour

4. Number of hours per week normally worked _____

5. Anticipated average amount of overtime per week _____

6. Current rate of overtime Pay \$ _____ Per _____

7. Tips/ Bonuses / Commissions per month _____

8. Employee is paid (circle one) **Weekly** **(2xMonth)** **Every Other Week** **Monthly**

9. Please, explain if work hours vary _____

10. If employee's work is seasonal or sporadic, please explain _____

I certify that the preceding information is true and correct:

Name of Company Official

Title of Company Official

Company

Name of Supervisor (Print)

Address

Date

City, State, Zip Code

Telephone Number

If you have any questions regarding the requested documentation please contact the Shawnee Tribe CCDF Program at 918-542-7232.

Warning: section 1001 of title 18 of the U.S Code makes it a criminal offense to make false statements or misrepresentations to any Department or Agency of the United States as to any matter within its jurisdiction.