

CHILDREN'S HOME SOCIETY OF CALIFORNIA

VERIFICATION OF SELF-EMPLOYMENT / INDEPENDENT CONTRACTOR

In order to comply with state regulations, verification of days/hours worked and income as a self-employed person are required to determine eligibility and need for child care. Complete this form and sign the declaration below. Be sure to attach the additional documentation specified below.

Parent/Guardian Name (Print): _____

Parent/Guardian Statement: I affirm, under penalty of perjury, that I am self-employed or an Independent Contractor. My schedule, including a description of my employment and an estimate of the days and hours I work per week, is listed below. I have attached supporting documentation in order to demonstrate the days and hours that I work. I declare this information is true and correct. I understand that a willful statement of false information for the purpose of receiving subsidized child care services is considered fraud and is an offense punishable by law. If I have provided client information, I authorize Children's Home Society of California to contact those clients to verify information as necessary.

Parent/Guardian Signature: _____ **Date:** _____

Name of Business: _____

Type of Business: _____ **Business Telephone:** _____

Business Address: _____

Estimated Days that may be worked (check as applicable): ☐Sun ☐Mon ☐Tue ☐Wed ☐Thu ☐Fri ☐Sat

Estimated number of hours per week: Minimum: _____ Maximum: _____

Hours worked between _____ and _____ (Example: between 8:00am and 6:00pm)

Describe your employment, including your job duties performed.

You must attach the following additional documentation to this form. If the additional documentation is not attached, this form will be considered incomplete and outstanding and be cause for denial or termination of services.

1. One or more of the following to demonstrate **days and hours worked**:

☐List of Clients with Contact Information ☐Client Receipts ☐Appointment Logs ☐Job Logs
☐Mileage Logs ☐Other schedule information attached: _____

~AND~

2. One or more of the following to demonstrate **income**:

☐A letter from the source of self-employment income
☐Most recently signed and completed tax return with a statement of current estimated income for tax purposes
☐Other business records (such as ledgers, receipts or business logs)

FOR CHS OFFICE USE ONLY:

☐ Primary Parent ☐ Secondary Parent

Notes: _____

Staff Name: _____

Staff Title: _____

Staff Signature: _____

Date: _____