



Child Care Assistance Program (CCAP)
One College Drive, East Peoria IL 61635-0001
309/690-7300 800/301-3304 Fax 309-690-7320
Hours of Operation: Monday through Friday, 8:00 a.m. – 4:30 p.m.

INCOME AND WORK HOUR VERIFICATION

I hereby authorize my employer to release the following information to the Child Care Connection, Child Care Assistance Program.

signature

date

INCOME AND WORK HOUR VERIFICATION
(to be filled out by employer)

Name of employee: _____ Social Security #: _____

Date employee started working: _____

Still employed? _____ If no, date last worked: _____

Any lapse in employment (i.e. lay off, medical leave, worker's compensation ...)? _____

If yes, list dates: from: _____ to: _____

Days and hours employee works:

Monday: _____ Tuesday: _____

Wednesday: _____ Thursday: _____

Friday: _____ Saturday: _____

Sunday: _____

Hourly rate: _____ Average hours worked weekly: _____

Has this employee worked a different schedule in the past? _____ If yes, please list
schedule: M _____ T _____ W _____ TH _____ F _____
SAT _____ SUN _____ Dates employee worked this schedule: _____

If irregular hours and days are worked, please give us an average of hours per week:

Employer: _____ Phone: _____

Address: _____

City/State/Zip: _____

Employer Signature: _____ Date: _____

Title: _____