



DECLARATION OF INCOME FOR IRREGULAR EMPLOYMENT

This form must be completed by any adult household members who are employed intermittently, self- employed, or who, for whatever reason, do not have tax forms, W-2 forms, check stubs, or applicable Department of Children and Family Services printouts to verify their income.

Name		Child's N	Child's Name City, State, Zip Email, state that my income or support comes from:		
Address		City, Sta			
Phone		Email			
l,		, state tha			
☐ Self-emplo	oyment (provid	e most recent IRS Form 1099))		
☐ Parents/Fa	amily (attach a	statement from person prov	iding support)		
\square Check all t	hat apply:	Seasonal employment	Irregular employment	Cash payments	
Provide g	ross income for	the past 12 months:			
	MONTH	GROSS INCOME	MONTH	GROSS INCOME	
☐ Other					
		od, and transportation expe			
	-	which I have provided regard			
misrepresentation co	uld affect the el	ligibility of my child to partici	pate in a publicly-funded ear	rly childhood program.	
Parent name (print) _					
Parent signature			Date		
Approving Authority			Date	Date	