

## CERTIFICATION OF EMPLOYMENT, SELF-EMPLOYMENT OR SCHOOL ATTENDANCE

		If you are self-employed,	you must complete	
	-			plete Sections 1, 2 and 5.
Applicant's Na	1. APPLICANT INFOR	RMATION	2. EMPLOYER / SCHOOL INFORMATION Employer's Business/School Name	
Date of Birth	Social Security Number	Driver License Number	Employer's/Schoo	Address
Explain why a				<b>MPLETE THE FOLLOWING:</b> oyment with your business.
		.,	Juge gemme en pr	
				M / PM, Specify) Mandatory
Veekly Work Days (Specify) Mandatory				M/ PM, Specity) Mandatory
	4. IF YOU	J ARE SELF-EMPLOYE	D, COMPLETE T	HE FOLLOWING
Your Work Days (Specify) Mandatory			Working Hours (A	M / PM, Specify) Mandatory
5.	IF ATTENDING SCHO	OL. HAVE A SCHOOL		R COMPLETE THE FOLLOWING:
	hy a driver's license is nec	,		
Neekly Class	Days (attach separate she	et if necessary)	Class Hours (AM	/ PM, attach separate sheet if necessary)
-				
	vear or affirm that the info required to engage in ga	5		ne best of my knowledge and that a driver's
Signature of Applicant			Date	
Signature of F	mplover/School Administra	ator (If Applicable)	Date	Title of Employer/School Administrator