

Self-Declaration of Income Form

By my signature below, I attest that I have been working and receiving payment for the work listed. I do not have documentation available and it is not possible to have the people who pay/paid me provide a letter to verify my income.

Full Name: _____

Type of Work (ex. Childcare, Cashier, Warehouse, etc.): _____

Payment Amount Received: _____

Frequency of Payment (one-time, daily, weekly, etc.): _____

Average hours worked per week: _____

Full Name: _____ (Print) Phone: _____

Signature: _____ Date: _____

Disclaimer: East Cooper Community Outreach has the right to confirm and follow up on all information provided during the eligibility verification process. Providing false information may disqualify a person from receiving services. Additionally, completing this process does not guarantee access to any or all services.