

CLINTON/JACKSON EARLY CHILDHOOD IOWA
Preschool Scholarships

Date _____

**INCOME VERIFICATION - TO BE USED ONLY IF INCOME STATUS HAS CHANGED
SINCE FILING YOUR 2009 FEDERAL INCOME TAX RETURN.**

Employee Name: _____

Address: _____

City/State: _____

Place of employment: _____

Address: _____

City/State: _____

Full time or part time: _____

Number of hours per week: _____

Wage per hour: _____

Is there overtime? _____

Date Employee started: _____

If this is a food service job, does the employee receive tips? _____

Average amount of tips received per week: _____

Signature of the Employer or Designee: _____

Title: _____

Date: _____

Please return to:

CLINTON/JACKSON EARLY CHILDHOOD IOWA
PRESCHOOL SCHOLARSHIPS
1900 N 3RD ST
PO BOX 2957
CLINTON IA 52733-2957