



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, check stubs, or applicable Department of Children and Family Services printouts to verify their income.

	ornitodes to verify their in		Ch:ld/a	Name a							
Name Address Phone			_ City, State, Zip								
						l,	l,			_, state that my income or support comes from:	
	☐ Self-employment (2024 IRS Tax Return)										
	\square Parents/Family (attach	a statement from pe	rson pro	viding support)							
	☐ Circle all that apply: Seasonal empl			yment Irregular employment Cash payments							
	☐ Other										
_	Provide gross income f										
	_	<u> </u>	.s. —								
	MONTH	GROSS INCOME		MONTH	GROSS INCOME						
			_								
√ly rent/h	nouse payment, utilities,	food, and transportat	tion expe	nses are being paid for b	y:						
	-	·	_	_ ,	nd that any false statements d early childhood program.						
Parent na	ame (print)										
Parent sig	gnature				Date						
lefferson	Parish Annroving Author	·itv			Date						