



**WAGE VERIFICATION FORM—SELF EMPLOYED**

Please list income received for the most recent 4 weeks.

**I am providing this written statement of my income from my business,**

\_\_\_\_\_ , for the period beginning

(business name)

\_\_\_\_\_ and ending \_\_\_\_\_.

(date)

(date)

**INCOME**

Date	Amount	Source: Name of Customer	Description of Service

This form is to record self-employment income. It is to be used only when other business or tax records are unavailable. This information is confidential and will be used only to determine your eligibility for the NC Pre-K program. It cannot be released without your written consent.

**WAGE VERIFICATION FORM—SELF EMPLOYED  
CONTINUATION SHEET**

**INCOME**

<b>Date</b>	<b>Amount</b>	<b>Source: Name of Customer</b>	<b>Description of Service</b>

\_\_\_\_\_  
Parent / Step-parent / Legal Custodian / Legal Guardian Signature

\_\_\_\_\_  
Date

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