

Verification Worksheet

Date: _____

Head of Household's Name: _____

Children's Names:

- | | |
|----------|----------|
| 1. _____ | 4. _____ |
| 2. _____ | 5. _____ |
| 3. _____ | 6. _____ |

Verified Food Assistance or TAF Number: ____ - ____ - ____ - ____ - ____ - ____ - ____ - ____

Attach documentation from Kansas Department for Children and Families.

Verified FDPIR Number: _____

Attach documentation from Tribal Authority.

Verified Foster Child Case Number: _____

Attach documentation from a State child welfare agency or court.

(a) Gross pay includes routinely earned overtime, holiday pay, vacation pay, shift differentials, etc.

(b) Do NOT annualize income if it is ALL received with the SAME frequency. Otherwise, convert to annual income using the following factors: Weekly X 52; Every 2 weeks X 26; Twice a month X 24; Monthly X 12.

	Source of Employment/ Income (2)	Gross Pay from Income Documentation (3)	Gross Pay from 2 nd Consecutive Pay Stub (4)	Total Gross Pay (5)	Average Gross Pay (6)	Income Frequency (Circle One) (7)	Conversion Factor (8)	Verified Income (9)
1						W E2 2M M Y		
2						W E2 2M M Y		
3						W E2 2M M Y		
4						W E2 2M M Y		
5						W E2 2M M Y		
6						W E2 2M M Y		
Total Verified Income								

Check **ONE** Income Frequency:

☐ W = Weekly ☐ E2 = Every 2 Weeks ☐ 2M = Twice a Month ☐ M = Monthly ☐ Y = Yearly

Total Number Living in Household: _____

Results of Verification Eligibility Status:

☐ Tier 1 ☐ Tier 2

Date/Method of Follow-up Contact, if applicable: _____

Date Verification Completed: _____

Instructions for Completing Verification Worksheet

1. Date: Record today's date.
2. Head of Household's Name: Record the name of the person who signed the income eligibility form.
3. Children's Names: Record the first and last names of all in Part 1 on the income eligibility form.
4. Verified Food Assistance, TAF, FDPIR, or Foster Child number:
You may contact the household directly OR the local Kansas Department for Children and Families, Indian tribal office or a State child welfare agency or court to obtain documentation that the children listed were eligible for Food Assistance, TAF or FDPIR benefits or a foster child at any time from the month of income form to the current date.

If DCF, the tribal office, the State child welfare agency, or court notifies you that a household did not receive Food Assistance, TAF, or FDPIR or did not have a foster child at any time from the month prior to income eligibility form until the current date, give the household the opportunity to supply income information.
5. Total Verified Income: Households must provide proof of income for any point in time between the month prior to income form and the time the household is required to provide income documentation. Income from all sources listed on the income form must be verified.
 - Column 2 – Record the source or type of income (e.g. farm, self-employment, job #1, child support, etc.)
 - Column 3 – Record the current gross income from each income source.
 - Wages and Salary
 - If paycheck stubs are used as documentation for regular wages and salary income, a current paycheck stub for two or more consecutive pay periods to cover at least one month. If pay period is monthly, provide at least two consecutive paycheck stubs to cover at least two months.
 - Letter on letterhead from employer stating current gross wages paid and how often they are paid, signed and dated by employer. (Confirmation of Earnings Letter)
 - Self-Employment/Farm Income/Seasonal
 - Page 1 of last year's IRS Form 1040
 - Schedule 1 (IRS 1040 Income Verification Worksheet)
 - Other Schedules, if applicable. If a household has multiple businesses, it may be necessary to seek clarification from the household to determine which figures reported apply to each individual business' income.
 - Social Security/Pensions/Retirement
 - Social Security retirement benefits received
 - Statement of benefits received
 - Pensions award notice
 - Current check stubs for two consecutive payments of SS/retirement
 - Unemployment Compensation/Disability/Worker's Compensation
 - Notice of eligibility from State Employment Security Office stating amount **OR**
 - Current check stubs for two consecutive payments
 - Welfare Payments
 - Benefit letter from welfare agency
 - Child Support/Alimony
 - Court decree, agreement, or statement from State Child Support Payment Center OR
 - Copies of most current checks received.

Instructions for Completing Verification Worksheet, continued

All Other Income

- Provide information or papers that show the amount of income received, how often it is received, and the date received.

No Income

- If no income, household needs to provide a brief note explaining how they provide for food, clothing, and housing for the household.

Homeless

- Documentation of homelessness must be provided by a school homeless liaison, an emergency shelter, or an agency assisting in relocation.

- Column 4 – If paycheck stubs are used as documentation for regular wages and salary income, two consecutive paycheck stubs could be provided. Record the current gross income from a second paycheck stub, if applicable.
 - Column 5 – Record the total gross income by adding columns 3 and 4, if applicable.
 - Column 6 – Divide total gross income listed in column 5 by 2 and record the answer in column 6, if applicable.
 - Column 7 – Record the frequency of pay period for each income source. This can be obtained from the letter from the employer, paycheck stubs or court record. Determine if the pay period is weekly, every two weeks, twice a month, or monthly. If income tax records are provided for self-employment, farm or seasonal income, the pay period is annual.
 - Column 8 – Record the conversion factor, if applicable. If income from ALL sources is received with the same frequency, leave this column blank. Otherwise, record the appropriate annual conversion factor for each income source: Weekly = 52; Every 2 weeks = 26; Twice a month = 24; Monthly = 12.
 - Column 9 – Record the verified gross income from each pay source.
 - Total the amounts in column 9 and check the appropriate income frequency for the household.
6. Total Number Living in Household: Record the total number of household members listed on Income Eligibility Form.
 7. Results of Verification Eligibility Status: Indicate the determination for this household as Tier 1 or Tier 2.
 8. Date/Method of Follow-up Contact: If a follow-up contact was made, record the date of the contact and the method used (i.e. phone, mail, etc.)
 9. Date Verification Completed: Record the date that verification was completed for this application.