

EMPLOYEE CERTIFICATION FORM INSTRUCTIONS

Cowley County has received a grant from the KS Dept. of Commerce *Kansas Small Cities CDBG Program* to assist with CV Funding. The employee job certifications are confidential and are not for public view; they **may only be checked by the Kansas Department of Housing and Urban Development and our Grant Administrator**. The survey is not to determine the exact income of a household, but rather if the income is above or below the set income limits.

INSTRUCTIONS: Please complete a separate job certification for each employee that is being retained. Enter name of business and date of hire. The employee will then complete the form as follows:

What is the employee's family size? Check the applicable box under Family Size

On that same line, indicate what range the household income is. Please note this gross income of all family members 18 years of age and older. The amount should be for the past 12 months with factoring in money lost during the past several months (if applicable). Please refer to columns **A (30%)**, **B (50%)**, and **C (80%)** for the State's income limits for your family size. If the gross income* of your family is below the income limits listed in Column A, check the box that says "**Income below Column A**". If your income falls between the amounts in Column A (30%) and Column B (50%), please check the box marked "**Income between Column A & B**". If your household income falls between the amounts in Column B (50%) and Column C (80%), please check the box marked "**Income between Column B & C**". If the income of your family is above the income limit listed in Column C for the family size, check the bottom box ("**Income above Column C**"). **Please note that income is defined as: Adjusted Gross income as defined for the purpose of reporting under Internal Revenue Service IRS Form 1040 for individual Federal annual income tax purposes.*

Household Demographic Information: Please answer the household and demographic information as completely as possible. Not that "disabled" is defined as a person who has a physical or mental impairment, which sustainably limits one or more of such person's major life activities, has a record of such impairment, or is regarded as having such impairment.

Indicate if your employer offers a health care plan and whether you were unemployed before taking the job. The employee will need to indicate their job title, print and sign their name, and date the form which certifies the information is true and correct.

Please return the **ORIGINAL** completed job certification with the CDBG-CV Business Application. If you have any question or concerns about the employee certification form, please contact the following individual(s): _____, Phone Number: _____