



**Eastern Shawnee Tribe Child Care Program**  
10100 S. Bluejacket Rd. Suite 3  
Wyandotte, Ok 74370  
Phone 918-666-7710 Ext: 1122  
Fax 918-666-7717

## **Employment Verification**

**Date:** \_\_\_\_\_

**Employee Name:** \_\_\_\_\_

**Place of Employment:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_

**Days worked:** \_\_\_\_\_  
(PLEASE BE SPECIFIC)

**Hours worked:** \_\_\_\_\_  
(PLEASE BE SPECIFIC)

**How Often Paid:** \_\_\_\_\_

**Employer/ Supervisor Signature:** \_\_\_\_\_

**\*Employer must complete form.**

**\*One must be filled out for each wage earner in the family.**