

 **Employment Outcome**

 **Attestation Form**

In circumstances where you are unable to attain from the client proof of employment documents, a written attestation that confirms the client’s employment outcome will be considered by the SSM. An attestation of the client’s employment checkpoint may only be used when all options to obtain proof of employment have been exhausted.

At each checkpoint a client is employed, you must provide proof of the client’s employment, and upload the documentation into the outcome checkpoint. Proof of employment on the checkpoint date can be uploaded into CaMS, including:

1. An employment letter from the employer stating continuous employment and average weekly hours; or
2. A pay stub including the checkpoint date, an average of at least 20 hours per week. (Reasonable copies such as an e-mailed photograph of the pay stub is acceptable.)

This attestation form can be used in lieu of the client’s pay stub or other confirmation of employment.

**Prior to submitting this form to the SSM, you must contact your Coordinator, Quality Assurance and Program Support to receive pre-approval for consideration of this attestation.**

# Attestation Instructions:

1. Contact your Coordinator, Quality Assurance and Program Support for pre-approval.
2. Complete the form and upload into CaMS at the appropriate checkpoint for SSM approval.
3. Upload all supporting documents available into CaMS at the same checkpoint under Attestation.

# Case Information:

|  |  |
| --- | --- |
| Service Provider: Choose an item.  | Lead Case Manager:       |
| Client Initials:        | EAP Case Reference Number:       |
| Outcome Checkpoint: Choose an item.  | Outcome Checkpoint date:       |

# Employment Offer Information:

|  |  |
| --- | --- |
| Employer:        | Employment Status: Choose an item.  |

# Documentation Attempts Summary:

Please include all information about your attempts to retrieve this information from the employer/client.

|  |  |  |
| --- | --- | --- |
| **Date** | **Contact Type** | **Notes** |
| Click or tap to enter a date. | Choose an item. |       |
| Click or tap to enter a date. | Choose an item. |       |
| Click or tap to enter a date. | Choose an item. |       |

# Additional Documentation

Please attach any documents that show client proof of hours worked over 20 hours for the outcome date period. Examples of documentation include:

* Screenshots of pay apps
* Approved time sheets
* Email from a client or employer that has details of work
* Pay stub that is missing required information

# Rationale for Attestation

Please include a rationale that includes additional documentation and supporting information that have been successfully collected. The supporting information should be enough that a reasonable person would conclude that the client has achieved the Funded Outcome.

|  |
| --- |
|     |

**Acknowledgement:** The case manager has reviewed the information in this form and certifies, to the best of their knowledge, that the information they have provided is true and accurate.

**Case Manager First and Last name:**

**Date of Submission:** Click or tap to enter a date.