



Tennessee Department of Children's Services

Verification of Employment or Employment Readiness Training (AA/SPG ROE)

(All applicable fields **MUST BE** completed.)

Youth's Name:				DOB:	
Youth's Address:					
	Street Address	City	State	Zip	

Provide a response for the applicable section below.

VERIFICATION OF EMPLOYMENT:	
Name of Employer:	
Date of Hire:	
If the youth has been employed for thirty (30) days or more, are they currently working at least 80 hours per month?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable-Youth employed for less than thirty (30) days
If the youth has been employed for less than thirty (30) days, are they anticipated to work at least 80 hours per month?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable-Youth employed for greater than thirty (30) days

VERIFICATION OF ENROLLMENT IN EMPLOYMENT READINESS TRAINING	
Name of Employment Readiness Training Program:	
Start Date for Employment Readiness Training Program:	
Date Expected to Complete Employment Readiness Training Program:	
Employment Readiness Training is a program designed to promote or remove barriers to employment.	

Signature:			Date:	
	(Employer or Representative from the Employment Readiness Training Program)			
Title:		Phone Number:		
Email Address:				

Whoever knowingly obtains, or attempts to obtain, or aids, or abets any person to obtain, by means of willfully false statement or representation or by impersonation, or other fraudulent device, any assistance on behalf of a child or other persons pursuant to the Interstate Compact on Adoption and Medical Assistance to which such child or other person is not entitled or assistance greater than such child or other person is entitled, commits a Class E felony. (This means that making any statement that is not true OR failing to inform the Agency of any later change that might affect the adopted child's eligibility for the current assistance rate may result in criminal charges.)

Check the "Forms" Webpage for the most current version and disregard all previous versions. This form may not be altered without prior approval.

Distribution: Adoptive Parent, Permanent Guardian, Subsidy Specialist

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