

Youth Employment Verification Form

(For individually hired youth, not youth groups)

Please submit this completed, signed and notarized form with the Final Reimbursement Request Packet.

Local Agency: _____

Supervisor Name: _____

Youth Employee Name: _____

Youth Employee age at time of employment: _____

By signing below, the youth employee and supervisor acknowledge and affirm that the following statements are true and correct to the best of their knowledge and belief:

- Youth Employee is 14 to 25 years of age at the time of employment.
- Youth Employee is considered a temporary employee of the local agency and is not an employee of the State of New Mexico.

Employee Signature

Date

Supervisor Signature

Date

STATE OF NEW MEXICO

COUNTY OF _____

The foregoing document was affirmed before me this _____ day of _____, 20____, by the above-named individuals, who appeared before me in person, are personally known to me or identified by me through satisfactory evidence, and who made a vow of truthfulness or fidelity on penalty of perjury.

Signature of Notary Public

Seal:

My Commission Expires: _____