State of Illinois
Department of Human Services - SNAP Employment and Training

6A(1 YEAR)

REGULAR EARNFARE ATTENDANCE RECORD

I. Client Name: _____ Employer Contact Name: _____

Address: _____ Company Name: _____

Social Security Number: _____ Address: _____

SNAP Case Number: _____ City, State: _____

Telephone: _____ Telephone: _____

II. REFERRAL

Report to: _____ on _____ at _____
(name) (start date) (time)

SNAP Work-off Hours: _____ + Cash Assistance Hours: _____ = Total Hours: _____

Work Schedule: (Check Days/List Hours): ☐ Monday ☐ Tuesday ☐ Wednesday HOURS: _____

☐ Thursday ☐ Friday ☐ Saturday ☐ Sunday

Earnfare Caseworker: _____ Telephone: _____ Fax: _____

III. DAILY SIGN IN/OUT

DATE	TIME IN	LUNCH Start Time	LUNCH End Time	TIME OUT	TOTAL HOURS	CLIENT SIGNATURE (sign each workday)

Earnfare clients may not work more than 40 hours per week. Does your organization have a paid lunch period? ☐ Yes ☐ No

If yes, count the paid lunch period toward the total work hours; if no, do not count the unpaid lunch period toward the total work hours. Total Hours Worked **(INCLUDING LUNCH PERIOD, IF PAID):** _____

Should the client be reassigned to this employer/location? ☐ Yes ☐ No

(if no, please explain): _____

IV. PAYMENT VERIFICATION/CALCULATION:

If client works all required hours, issue the maximum Earnfare payment.

Total Hours Worked: _____ - _____ SNAP Work-off Hours = _____ Earnfare Hours Worked:

Earnfare Hours Worked _____ X _____ State Minimum Wage = _____ Earnfare Cash Assistance issued.

DATE ISSUED: _____ Total Hours Worked (including lunch period, if paid): _____

Earnfare Employer: _____ Date: _____
(Authorized Signature)

This form is authorized by 89 Ill. Adm. Code 121.160 and is voluntary. There are no penalties to your agency for failure to respond. However, ongoing eligibility for SNAP benefits may be affected if this form is not completed and returned in a timely manner.

INSTRUCTIONS FOR EARNFARE EMPLOYER: Submit this document with original signatures with Billing submittal; copy to Earnfare Worker.