



#1055 -CW | Statement of Cash Wages | Step Up For Students

Please have your employer complete this form

Application # _____

This is to certify that _____

Full Name of Applicant

is paid gross (before any deductions) cash wages in the amount of \$ _____

weekly bi-weekly every-other-week monthly (Check One Box).

Under penalties of perjury, I certify that the information presented is true and accurate to the best of my knowledge and belief. The undersigned further understands that providing false representations herein constitutes an act of fraud. False, misleading or incomplete information may result in the denial of the scholarship application or revocation of a scholarship award.

Name of Employer or Employer Representative (Please Print)

Title of Employer or Employer Representative (Please Print)

Signature of Employer or Employer Representative

Date