

Texas Enterprise Zone – Post-Employment Employee Certification Survey

Texas Comptroller of Public Accounts

The Comptroller of Public Accounts distributes this survey for the Texas Economic Development Council to report the number of jobs we have created and the economic characteristics of our employees. **Completing this survey is voluntary and your responses are confidential.**

This survey is used to obtain information from you as an employee of _____, located in the city of _____, Texas.

Employee Name _____ Employment Date _____

Employee Payroll ID# _____ Home Address, Street, City, Zip Code _____

Please check all boxes that apply to you:

- I was unemployed for at least three months, **from** _____ **to** _____, before being employed with _____.
Last employer name _____
- I received public assistance benefits before being employed by _____, including welfare payments, Women, Infants and Children (WIC) or food stamps (*food stamps must be received by you, not an immediate family member*).
List name of public assistance program(s): _____ **Benefit ID#:** _____
- I am a low-income individual, as defined by Section 101, Workforce Investment Act of 1998 (29 U.S.C. Section 2801(25)).
- I am an individual with a disability as defined by 29 U.S.C. Section 705(20)(A). (*Individuals MUST be certified by an authorized agency or doctor.*)
Authorized agency name _____ **Physician name** _____ **Physician phone number** _____
- I am an inmate imprisoned by order of a court, whether actually imprisoned in a facility operated by, or under contract with, the Correctional Institutions Division of the Texas Department of Criminal Justice or under the supervision or custody of that agency's Paroles Division.
- I, or an immediate family member, received Supplemental Security Income (SSI) or Temporary Assistance for Needy Families (TANF) payments.
List the name of the program(s): _____ **Program(s) ID#:** _____
- I meet the current low income or moderate income limits (reference below) developed under Section 8, United States Housing Act of 1937 (42 U.S.C. Section 1437f et seq.) for _____ County, Texas.

Enter the year of HUD income level for this certification _____
You can access HUD Program Income Limits (Section 8, Section 221(d)(3) BMIR, Section 235 and Section 236) to find the specific income limits data set to use based on the year employee was hired via this link: www.huduser.org/portal/datasets/il.html.
- I am a member of a family of _____ whose **total** family income was (subtotal of the amounts below) \$ _____ before I was hired at or below the income level indicated from the HUD Program. Income Limits referenced immediately above:
You \$ _____
Your spouse \$ _____
All dependents \$ _____
Family members living with you \$ _____
Total family income (subtotal of all the amounts above) \$ _____
- I was under the permanent managing conservatorship of the Department of Family and Protective Services on the day before my 18th birthday.
- I am entering the workforce after being confined in a facility operated by, or under contract with, the Texas Department of Criminal Justice for the imprisonment of individuals convicted of felonies other than state jail felonies.
- I have been released by the Texas Youth Commission and am on parole, if state law provides for such a person to be on parole.
- None of the above applies to me.

Certification

I declare and affirm under penalty of perjury that the statements made herein are true and correct to the best of my knowledge, information and belief.

Employee Name Print

Date

Employee Signature

Date