

**Date:** [Insert Date]

**To:** [Name of Subsidy Office/Agency]

**Address:** [Agency Address]

**City, State, Zip:** [City, State, Zip Code]

**Subject: Employment Verification for [Employee Name]**

To Whom It May Concern,

This letter is to formally verify the employment of **[Employee Name]** with **[Company Name]**. The information provided below is for the purpose of a Child Care Subsidy application.

**Employment Details:**

- **Job Title:** [Employee Title]
- **Employment Status:** [Full-time / Part-time / Seasonal]
- **Hire Date:** [Start Date]
- **Current Pay Rate:** \$[Amount] per [Hour/Month/Year]
- **Average Hours Per Week:** [Number of Hours]

**Work Schedule:**

[Example: Monday - Friday, 8:00 AM to 5:00 PM]

If you require any additional information or have further questions regarding this employee, please contact me directly at [Phone Number] or [Email Address].

Sincerely,

[Signature]

**[Your Name]**

[Your Title]

[Company Name]