



Support for Workers
Monthly Income Verification Form
Coal Workforce Transition Program

In support of my participation in Bridge to Retirement, I am providing my monthly declaration of employment income to the Government of Alberta to verify my ongoing payment eligibility. Even if I did not work and have \$0 income to report, I understand that I must provide this information by the 5th day of each month, for the duration of my eligibility. Failing to report my monthly employment income may result in my payment being withheld and/or ceased.

Name: _____, _____, _____
(last name) (first name) (middle initial)

Reference number: _____
(see 10 digit reference number in approval letter)

I declare my gross employment income for the previous month _____
(full month and year e.g. March 1-31, 2018)

was \$ _____. Below indicates the date(s) and gross income amount(s)
(gross monthly employment income)

I was paid in the previous month:

Date(s) Paid	Gross Income Amount(s) Paid

Signature

Date

Please submit this form to the Government of Alberta by e-mail, fax, or mail:

Email Address: HS.ISCC@gov.ab.ca

Fax Number: 780-422-9681

Address: Alberta Coal Workforce Transition Program
Alberta Community and Social Services
PO Box 17000
Station Main
Edmonton, Alberta
T5J 4R4

If you have any questions, please contact the Alberta Supports Contact Centre toll free at 1-877-644-9992 (hours: 7:30 a.m. to 8:00 p.m.).