



Employer Certification Regarding High School Diploma, GED or Equivalent Documents
CLASS and MDCP PROGRAMS ONLY

Participant Name (Client)

Applicant Name (Employee)

I

certify that I am

- The participant
- The legally authorized representative
- The designated representative

I certify that I have copy of the applicant's (Employee)

- High school diploma
- GED
- The applicant did not have either of these documents

If the above applicant **did not** have a copy of his/her high school diploma or GED, I have obtained the following:

- Documentation of a proficiency evaluation of the employee's experience and competence to perform job tasks, including an ability to provide the services needed by the individual, as demonstrated through written competency-based assessment; and
- At least three personal references from people not related by blood that evidence the person's ability to provide a safe and healthy environment for the individual

I understand that I must keep these document in my employee's file and produce them at the request of my case manager/ service coordinator, FMSA, and my DADS or HHSC employee, including utilization review nurse.

Employer's Name

Date