

SCSEP SELF-ATTESTATION FORM FOR ITEM P13 — EMPLOYED PRIOR TO PARTICIPATION?

On this date, I,		, certify
	(NAME OF APPLICANT/PARTICIE	
I am not em	nployed, that is:	
	I do not do any work at all as a paid employe	e; and
	I do not do any work at all in my own busine	ss, profession, or farm; and
	I do not work 15 hours or more as an unpaid worker in an enterprise operated by a member of my family; and	
	I do not have a job or business from which I was temporarily absent because of illness, bad weather, vacation, labor-management dispute, or personal reasons.	
Applicant's/Participant's Signature		Date