**Department of Human Services**

**INSTRUCTIONS FOR USE OF FORM HS-3302,**

**Family Assistance Self-Employment Calendar**

1. **Purpose of the form**

For the customer to document self-employment hours and income

1. **When it is used**

Any time a customer is needing to document self-employment hours and income.

1. **Who completes the form**

The customer and/or employer

1. **An explanation of what goes into any field that is not *clearly* self-explanatory or any additional information needed to process this form (e.g. routing, processing etc.)**

N/A

1. **Who needs the original and where should it be filed**

FARAS

1. **Who needs a copy and where should it be filed**

FARAS

1. **Length of time the form must be maintained after the service is rendered/case closed**

Pending