



# SEEKING EMPLOYMENT SELF-DECLARATION

Created 04/20/09

I, \_\_\_\_\_, declare that I am currently seeking employment and in order to  
(Print Parent Name)  
attain employment I will need childcare services for my child (ren). I understand that I am entitled to only 60-days to seek employment every fiscal year with written authorization from my Specialist. I may qualify for additional 20-days if I have a concurrent second need (e.g. employment, training) and have had this second need for at least 20 days while receiving services based on seeking employment. Also, I understand that if I qualify for the extension I must have prior authorization from my specialist in order to utilize it.

• **What is your plan to secure, change or increase employment** (How & where will you look for work, be detailed)? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

• **Less than 30 hours and no more than 5 days can be authorized weekly.** Actual child care hours must be approved by the agency. Hours can be set or varied. What hours do you feel will be needed for seeking employment? **Select one below:**

**Set Schedule:**

Day of the Week	Start time	End time
Sunday		
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		

**Varied Schedule:**

Range of hours: \_\_\_\_\_ to \_\_\_\_\_  
Earliest start time Latest end time Max. Hours per week

I hereby certify under penalty of perjury under the laws of the State of California that the information stated above and any documentation submitted herewith, are true and correct to the best of my knowledge, and that none of such information or documentation is misleading, untrue or false. I further understand and acknowledge that by signing this statement, the above information and documentation submitted herewith are subject to verification and I hereby grant Crystal Stairs, Inc. the authority to verify such information and documentation. If the above information and/or documentation submitted herewith are found to be false, untrue or misleading, I understand that I may be subject to prosecution and punishment under the laws of State of California.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY** Verified Information on (date): \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Spoke With: \_\_\_\_\_  
See Case Note dated: \_\_\_\_\_ Comments: \_\_\_\_\_