

ATTN:

CHILDREN'S HOME SOCIETY OF CALIFORNIA

STATEMENT OF SEEKING EMPLOYMENT

**Parental Declaration**

I, \_\_\_\_\_ declare under penalty of perjury that I am currently seeking employment. Additionally, I declare under penalty of perjury that the information included on this form is true and correct.

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

**Description of Seeking Employment Plan**

Briefly describe your plan to secure, change, or increase your employment.

To seek employment, I plan to (select all that apply):

- |  |  |
|--|--|
| <input type="checkbox"/> Attend job fairs            | <input type="checkbox"/> Apply to jobs in-person |
| <input type="checkbox"/> Attend employment workshops | <input type="checkbox"/> Apply to jobs online    |
| <input type="checkbox"/> Update resume/cover letter  | <input type="checkbox"/> Other (please explain): |

**Description of Child Care Hours**

Briefly describe when child care services will be needed. **Under 30 hours per week, up to 5 days per week.** (Please note: All child care hours requested are subject to program approval and are not guaranteed. This document does not indicate an approved schedule.)

Days of care: ☐ Sunday ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday

Please clarify the hours of care needed:

*(Use the back of this page for additional space if needed.)*

I declare this information is true and correct. I understand that a willful statement of false information for the purpose of receiving state subsidized child care services is considered fraud and is an offense punishable by law. I certify, under penalty of perjury, that the above information is accurate.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**FOR CHS OFFICE USE ONLY:**

☐ Primary Parent ☐ Secondary Parent

Notes: \_\_\_\_\_

Staff Name: \_\_\_\_\_

Staff Title: \_\_\_\_\_

Staff Signature: \_\_\_\_\_

Date: \_\_\_\_\_