



SEEKING EMPLOYMENT REQUEST FORM

Return to:

Case Name: \_\_\_\_\_

Person Requesting to Seek Employment: \_\_\_\_\_

Period of Eligibility for Seeking FROM: \_\_\_\_\_ TO: \_\_\_\_\_

(Seeking Employment is not to exceed a period of 60 working days between July 1<sup>st</sup> and June 30<sup>th</sup>)

Days and Hours Plan to Seek Employment:

(Restricted to M-F between 6:00 am and 6:00 pm and for less than 30 hours per week).

	Monday	Tuesday	Wednesday	Thursday	Friday
Start					
End					

Plan to secure, change, or increase employment:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I understand that child care while I seek employment is not authorized until I have submitted this form to my assigned Case Manager. I will contact my assigned Case Manager as soon as I find employment.

I declare under penalty of perjury under the laws of the State of California that the information I have given on this form is true, correct, and accurate.

\_\_\_\_\_  
Signature of person making request

\_\_\_\_\_  
Date