

# Applicant Statement

## IDENTIFYING INFORMATION

Applicant's Name: \_\_\_\_\_

Last First MI

Participant ID: \_\_\_\_\_ Application Date: \_\_\_\_\_

Family is two or more persons related by blood, marriage, or decree of court, who are living in a single residence.

- Married Couple & Dependent Children
- Parent or Guardian & Dependent Children
- Married Couple

**Applicant Statement:**

Please provide a brief description on your lack of or unverifiable income or **employment, the documentation limitations, and** how you have been supported for the 6-month period prior to application. If unable to obtain a satisfactory witness, please explain below.

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I hereby certify, under penalty of perjury, that the information stated above is true and accurate, and I understand that the above information, if misrepresented, or incomplete, may be grounds for immediate termination and/or penalties as specified by law.

\_\_\_\_\_

Applicant's Signature

Date

**Corroborative Witness Statement:**

Please provide a brief description below describing your knowledge of the above participants household income or employment as you understand it:

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I hereby certify, under penalty of perjury, that the information stated above is true and accurate, and I understand that I am a corroborating witness and that I possess the knowledge to validate the participants statement as listed above.

\_\_\_\_\_

Witness' Signature

Witness Printed Name

Date

\_\_\_\_\_

Witness' Relationship to Applicant

Witness' Contact Information

## Office Use Only

The above applicant statement is being utilized for documentation of low income for eligibility purposes, I have reviewed all documentation sources and documentation limitations with the participant and the corroborative witness.

\_\_\_\_\_

Case Manager Signature

Date

