



Office of Economic and Workforce Development
Workforce Development Division

APPLICANT STATEMENT

I HEREBY CERTIFY UNDER PENALTY OR PERJURY THAT I, THE UNDERSIGNED,

If applicant cannot obtain a satisfactory witness or provide a telephone contact, explain above.

I ATTEST THAT THE INFORMATION STATED ABOVE IS TRUE AND ACCURATE, AND UNDERSTAND THAT THE ABOVE INFORMATION, IF MISREPRESENTED, OR INCOMPLETED, MAY BE GROUNDS FOR IMMEDIATE TERMINATION AND/OR PENALTIES AS SPECIFIED BY LAW.

APPLICANT'S SIGNATURE and DATE

CORROBORATING WITNESS SIGNATURE

PRINT NAME OF APPLICANT

PRINT WITNESS NAME and RELATIONSHIP

OFFICE USE ONLY

The above applicant statement is being utilized for documentation of the following eligibility criteria:

SIGNATURE and DATE OF CERTIFYING OFFICIAL