ATTACHMENT D

APPLICANT STATEMENT FORM

The applicant statement may be used to document elig size when all other attempts to secure documentation l	gibility for family income, residence, and proof of family have been exhausted.
I certify, under penalty of perjury that I	
(If applicant cannot obtain a satisfactory witness or pro-	ovide a telephone contact, explain above.)
Applicant's Signature	Date
Applicant's Address, City, State, Zip	
Corroborating Witness Signature	Date
Witness' Relationship to Applicant	
Occ.	H Oak
Office	e Use Only
The above applicant statement is being utilized f	for documentation of the following eligibility criteria:
Signature of eligibility/intake worker	
Date	