

Glendale Community College CalWORKs Program

Main Campus: 1500 N. Verdugo Road • SF 114 • Glendale, CA 91208 • (818) 240-1000, X5508 Garfield Campus: 1122 East Garfield Ave., Glendale, CA 91205 • (818) 240-1000, X 5681 www.glendale.edu/calworks

VERIFICATION OF CALWORKS CASH AID BENEFITS

INSTRUCTIONS: Section A must be completed by the student before the form is submitted to the Department of Public Social Services. Section B must be completed by the eligibility caseworker of the agency providing benefits. This form will not be accepted if any part is left blank.

SECTION A:	TO BE COMPI	ETED E	BY THE STUDENT		
I authorize the Department of Public Social S	Services to provide	the inform	nation requested by Gl	endale Community	College.
Student Name (please print) Relationship of Student to Recipient		Student Signature Case Number			
The information provided below will be used bility and will be kept confidential by the carr					
The student listed above currently	receives CalV	VORKs	cash benefits for		
□ CalWORKs Cash Aid	th Student and C	hildren	Children Only	No Record	
Refugee Cash Assistance					
ls the participant listed as "Student" in Sec	ction A above clas	ssified as	a single head of hou	sehold?:	☐ No
Date benefits began	Tota	l months	used on 48 month of	clock	
Date parents' portion of cash aid benefit	s ended (if applic	cable)			
DPSS DIS	TRICT OFFICE	STAM	REQUIRED		
Agency Representative (please print)		Title/Official Position			
Signature		Date			
Agency Address		Telephone			

Form Updated: July 2011