

Statement of Unemployment
Preschool Programs

1) I hereby certify, under penalty of perjury that _____
Name of Parent/Guardian currently unemployed

stays at home or is going to school and makes (0) zero income.

2) I attest that the information stated above is true and accurate, and understand that the above information, if misrepresented, or incomplete, may be grounds for child’s dismissal from the Lancaster School District State Preschool Program and/or require repayment of all costs incurred for services rendered to the family.

3) _____
Parent/Guardian (applicant) printed name Parent/Guardian (applicant) signature Date

4) _____
Applicant’s address City Zip Code

5) Child’s Name: _____ Date of Birth ____ / ____ / ____

For Office Use Only

By signing below staff acknowledges they have read and explained the form to the applicant.

Signature of Agency Staff Date

Declaración de no estar trabajando

Programas Preescolares

1) **Por la presente certifico, bajo pena de perjurio que** _____
Nombre del Padre o Guardián actualmente desempleado

Me quedo en casa o voy a la escuela y no tengo ninguna entrada de ingresos.

2) Doy testimonio de que la información mencionada es verdadera y exacta y comprendo que la información anterior, si mal representada o incompleta, puede ser motivo de despedir al niño de Lancaster School District-Early Childhood Education-Programa Preescolar y/o la devolución del costo será requerido por servicios prestados a la familia.

3) _____
Padre/Guardián (Solicitante) nombre impreso Padre/Guardián (Solicitante) Firma Fecha

4) _____
Dirección de Solicitante Ciudad Zona Postal

5) Nombre del Niño(a): _____ Fecha de Nacimiento ____ / ____ / ____

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Signature of Agency Staff

Date