

CONFIDENTIAL FAX COVER SHEET

Summer Youth Employment Program Eligibility Verification Request

DPSS FAX #: (626) 572-0181

Date: _____

CONTRACTOR INFORMATION:

Agency Name	Contact Name
Phone Number	FAX Number

YOUTH INFORMATION *(please complete all known information):*

Youth Name	Last Four Digits of Social Security #	Case Number
Address	Birth date	Case Name

Release of Information Form (ABCDM 228) must be attached to this request

TO BE COMPLETED BY DPSS STAFF ONLY (check all that apply):

- This Youth qualifies for the Summer Youth Employment Program due to receiving:**
- CalWORKs
 - Food Stamps
 - General Relief (ages 18-24, living with a relative whose income is at or below 200% of the Federal Poverty Level, and a related minor child in the home)
- Not Eligible**

Verified By: _____
DPSS Staff Name

Date: _____

IMPORTANT WARNING: This information is intended for the use of the person or entity to which it is addressed and may contain information that is privileged and confidential, disclosure of which is prohibited by law. If the reader of this information is not the intended recipient, you are hereby notified that any review, disclosure, dissemination, distribution or copying of this information is **STRICTLY PROHIBITED**. If you have received this information in error, please notify the sender immediately and arrange for a return or destruction of this information and or attachments.

APPLICANT'S AUTHORIZATION FOR RELEASE OF INFORMATION

(AGENCY OR INDIVIDUAL FROM WHOM INFORMATION IS REQUESTED)

To:

1. _____, RESIDING AT _____

_____, HEREBY AUTHORIZE YOU TO RELEASE TO THE

(NAME OF AGENCY, INSTITUTION, INDIVIDUAL PROVIDER) SPECIFIC

INFORMATION REQUESTED BY THIS AGENCY WHICH I CANNOT PROVIDE CONCERNING _____

THIS INFORMATION IS NEEDED FOR THE FOLLOWING PURPOSE _____

THIS FORM WAS COMPLETED IN ITS ENTIRETY AND WAS READ BY ME (OR READ TO ME) PRIOR TO SIGNING.

SIGNATURE OF APPLICANT		DATE
BIRTHPLACE	BIRTHDATE	MAIDEN NAME OF MOTHER
SIGNATURE OR NAME OF SPOUSE		DATE
BIRTHPLACE OF SPOUSE	BIRTHDATE OF SPOUSE	MAIDEN NAME OF SPOUSE'S MOTHER