

## **APPLICANT STATEMENT**

I hereby certify, that I	
	and accurate to the best of my knowledge and belief. I understand
that such information is subject to verification and further understand that the above information, if misrepresented or incomplete, may be grounds for immediate termination from any WIOA program and/or penalties as specified by law.	
,,,,	8
Applicant Signature	Date
Applicant Signature	Date
Applicant Address	
Offic	ce Use Only
The above applicant statement is being utilized for documentation of the following eligibility criteria:	
The above applicant statement is being utilized for documentation of the following enginnity criteria.	
certify that the individual whose signature appears above	provided the information recorded on this form
certify that the marviadal whose signature appears above	provided the information recorded on this form.
	<u> </u>
Signature of Certifying Staff	Date