



◆ Glendale Community College CalWORKs Program ◆

Verdugo 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. Please do not complete in pencil. Please do not use "White Out." The information provided below will be maintained confidentially by the GCC campus pursuant to Sections 76200-76246 of the California Education Code.

SECTION A: TO BE COMPLETED BY THE STUDENT

I authorize the Department of Public Social Services to provide the information requested by Glendale Community College.

Student Name (please print)

Student Signature

Relationship of Student to Recipient

Case Number

◆ SECTION B: TO BE COMPLETED BY DPSS DISTRICT OFFICE ◆

The student listed above currently receives CalWORKs cash benefits for:

(Please check one.)

<input type="checkbox"/> Both Student and Children	<input type="checkbox"/> Children Only... *On what date did parents' portion of cash aid benefits end? _____ Month / Date / Year	<input type="checkbox"/> No Record
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1. Date benefits began: _____ 2. Total months used on 48-month clock: _____

3. Is the participant listed as "Student" in Section A classified as a single head of household?: Yes No

4. If the participant received food stamps (CalFRESH), please indicate the

dates CalFRESH benefits were received: From: _____ / _____ To: _____ / _____
Month Year Month Year

DPSS DISTRICT OFFICE STAMP REQUIRED

Agency Representative (please print)

Title/Official Position

Signature

Date

Agency Address

Telephone