



Mt. San Jacinto College
CalWORKs Application



Date: _____ Semester: FA ___ SP ___ SU ___ 20 ___

Last Name: _____ First Name: _____ Middle Initial: _____

Student I.D.: _____ S.S. # _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Home Phone: _____ Cell: _____

Gender: Male ___ Female ___ Date of Birth: _____ Household: Single-parent ___ Two-parent ___

Ethnicity: (check one)

Table with 4 columns: American Indian / Alaska Native, Asian / Pacific Islander, Black / African American, Other/ Specify. Row 2: Filipino, Caucasian / White, Hispanic / Latino / Mexican American.

MSJC Campus: ___ San Jacinto ___ Menifee ___ Temecula ___ San Gorgonio Pass

Student signature: _____ Date: _____

Reviewed by: _____ (CalWORKs Counselor)

Program Eligibility

Are you currently enrolled at Mt. San Jacinto College? ___ Y ___ N

Are you currently receiving cash aid for yourself and at least one child? ___ Y ___ N

How many children in your household are under the age of 18? _____

Consent for Release of Information

I, the undersigned, consent to and request the County of _____ to release information regarding myself to the MSJC CalWORKs Program for use in educational/vocational planning and for evaluating my participation in the CalWORKs Welfare to Work activity. I authorize the release of information which may include one or more of the following: Name, Address, Phone, SS#, DOB, Other Pertinent Information.

I, the undersigned, consent to and request the MSJC CalWORKs Program to release information regarding myself consistent with the Federal Family Education Rights and Privacy Act of 1974, or other laws, regulations, or policies of the Department of Public Social Services for use in participation evaluation for CalWORKs. All information will be kept confidential and maintained as part of my records with the CalWORKs office at MSJC. Additionally, all information will be used exclusively in the administration or delivery of services. This release shall remain in effect during my enrollment or until revoked in writing by the undersigned.

Student: Last First M.I.

Student ID

Student Signature

Date

MSJC CalWORKs Staff Signature

Date