



# JOB SEARCH DOCUMENTATION

State Form 57104 (R / 3-23)  
FAMILY AND SOCIAL SERVICES ADMINISTRATION  
CHILD CARE AND DEVELOPMENT FUND (CCDF) VOUCHER PROGRAM

Name of Applicant and/or Co-Applicant
Case number

I am currently looking for a job and plan on doing the following:

- Complete job applications
- Register for work at an employment agency

I know my assistance will end on \_\_\_\_\_.  
*(month, day, year)*

I understand I must tell the eligibility office if my monthly income (gross pay, child support and social security) is more than the amount listed below for my family size.

Size of Family	Maximum Monthly Income
1	\$3,286
2	\$4,297
3	\$5,307
4	\$6,318
5	\$7,329
6	\$8,340
7	\$8,530
8	\$8,719

Size of Family	Maximum Monthly Income
9	\$8,909
10	\$9,098
11	\$9,288
12	\$9,477
13	\$9,667
14	\$9,856
15	\$10,046
16	\$10,235

Signature of Applicant	Date <i>(month, day, year)</i>
Signature of Co-Applicant	Date <i>(month, day, year)</i>