

## **Self-Attestation**



Par	cipant State ID#	
<u>co</u>	IPLETE ALL THAT APPLY:	
	Affected by Disaster hereby certify that I have temporarily or permanently lost employment due to the disaster on I employed at County.	l was
	Self-Employment Affected by Disaster  hereby certify that I am a self-employed individual and have become either unemployed or significantly underemployed due to the disaster on The name of my business is	
	Lost Documentation/Identification  do not have the required documentation due to the disaster and I understand that I must provide this docume within 30 days to be eligible to participate in the DRJP.  List all missing documentation:	entation
	Long-Term Unemployed  certify that I have been unemployed for twelve (12) or more of the last twenty-six (26) weeks and have made of find a job OR I have no work history and have made efforts to find a job.  List all employment history, including dates, for the last 7 months:	efforts
	Long-Term Underemployed  certify that I have been underemployed for twelve (12) or more of the last twenty-six (26) weeks and have madefforts to find a job. The category that best describes my current situation is: (must mark one)  Employed less than full time who is seeking full-time employment  Employed in a position that is inadequate with respect to my skills/training  Employed but meets the definition of WIOA low-income individual  Employed but current job earnings are not sufficient compared to previous earnings from previous employn	
Sig	ature of Potential DRJP Participant Date	

For additional information about Missouri Office of Workforce Development services, contact a Missouri Job Center near you. Locations and additional information are available at jobs.mo.gov or 1-888-728-JOBS (5627). The Missouri Department of Higher Education and Workforce Development is an equal opportunity employer/program. Auxiliary aids and services are available upon request to individuals with disabilities. Missouri Relay Services at 711.