

# CHILD WELFARE STIPEND MANDATORY JOB SEARCH FORM

Please check the quarter for this form:

- September 2009
- December 2009
- March 2010
- June 2010

**Name of Student** \_\_\_\_\_

**Name of University** Sacramento State

**Date of Graduation / MSW Award** \_\_\_\_\_

Years of IV-E Stipend Support     1 Year         2 Years         Other \_\_\_\_\_

List all counties within a 75 mile radius of your residence	Date CWS App. Submitted	Date Courtesy Card Filed	Date Personnel Office Contacted	Agency and Phone of Person Receiving Application	Date(s) CWS Interview	Interview Completed Y/N	Name and Department of Agency Representative Administering Interview	Job offer Y/N	Agency Representative and Phone Number for Verification	Date CWS Hire
Below list other counties in which a CWS Application for Employment has been Submitted										