



TANF CLIENT WORK ACTIVITIES

For the Month of:

REMINDER: Penalties and Sanctions will be imposed for missing work hours not turned in. Only hours verified and documented on your work plan will be considered acceptable.

Clients Print Name:

Clients Signature:

Date:

I sign this timesheet aware that all information is accurate and correct. I understand that submitting false information can jeopardize my eligibility for TANF.

CDS Signature:

Date:

REMEMBER TO ATTACH ALL VERIFICATIONS

Weekending: _____	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Acceptable Work Activities							
Life skills training/education							
Job search and job readiness assistanc							
Culturally relevant work activities							
Positive Indian Parenting							
Unsubsidized employment							
Book Club							
Weekending: _____	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
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Job search and job readiness assistanc							
Culturally relevant work activities							
Positive Indian Parenting							
Unsubsidized employment							
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