

ASSISTED ACTIVITY JOB CREATION CERTIFICATION FORM 2024

*This is a confidential form for reporting job creation for monitoring purposes only for the City of Los Angeles, Economic and Workforce Development Department, Economic Development Division. Effective date: **June 01, 2024.***

EMPLOYER SECTION: *To be completed by the employer.*

Employer/Owner's Name: _____ Business Name: _____

Business Address: _____

Employee Position Information For:

Employee Name or Employee ID#: _____

This position is: a) a New Position an Existing Position

b) Full Time (at least 35 hrs per week) Part Time (# of Hours/Week: _____)

Position Title: _____ Start Date: _____

Job Category for this Position: Check One			
Official or Manager		Sales	Operative (Semi-skilled)
Professional		Office or Clerical	Laborer (Unskilled)
Technician		Craft Worker (Skilled)	Service Worker

Signature of Company Representative _____ Date Signed _____

EMPLOYEE SECTION: *To be completed by the employee.*

Residence of City, State & Zip: _____

Race/Ethnic Origin: Check one in each section.

Race (check one of the following 10 categories):	
American Indian or Alaska Native	American Indian or Alaskan Native AND White
Asian	Asian AND White
Black or African American	Black/African American AND White
Native Hawaiian or Other Pacific Islander	American Indian/Alaskan Native AND Black/African-American
White	Balance / Other

Ethnicity (check one):	
Hispanic / Latino	
Not Hispanic / Latino	
Decline to state	

Income Status: Find the size of your family on the grid below, then circle the income level in that row that applies to your family prior to your current employment. Family Income levels are subject to change by HUD.

2024 CDBG Income Guidelines– Circle the appropriate box:				
Family Size	Group 1	Group 2	Group 3	Group 4
1 Person	\$0 - \$29,150	\$29,151 - \$48,550	\$48,551 - \$77,700	\$77,701 +
2 Person	\$0 - \$33,300	\$33,301 - \$55,450	\$55,451 - \$88,800	\$88,801 +
3 Person	\$0 - \$37,450	\$37,451 - \$62,400	\$62,401 - \$99,900	\$99,901+
4 Person	\$0 - \$41,600	\$41,601 - \$69,350	\$69,351 - \$110,950	\$110,951 +
5 Person	\$0 - \$44,950	\$44,951 - \$74,900	\$74,901 - \$119,850	\$119,851 +
6 Person	\$0 - \$48,300	\$48,301 - \$80,450	\$80,451 - \$128,750	\$128,751 +
7 Person	\$0 - \$51,600	\$51,601 - \$86,000	\$86,001 - \$137,600	\$137,601+
8 Person	\$0 - \$54,950	\$54,951 - \$91,550	\$91,551 - \$146,500	\$146,501 +

Falsification of a certification form is a violation of federal law and subject to prosecution.

Signature of Employee _____ Date Signed _____
 (Signature required for this form to be valid.)

CONSULTANT SECTION: *To be completed by the consultant (if applicable)*

Contractor Name: _____ Consultant's Name: _____

Signature of the Consultant _____ Date Signed _____