

	Workforce Solutions
Date:	
Dear MFIP Participant,	
	ng with Employment Services (your job counselor) less than one year of age. This exemption has a
In a 2 parent household, only 1 parent ma	y use this exemption.
•	ise read all the information at the bottom of the ncial worker will check to see if you are eligible to
Request for child under age one exemption from Employment Services	
I am requesting the child under age one exemp	tion from Employment Services.
My financial worker will review this request and determine eligibility for this exemption.	
I understand that I will not have to participate with Employment Services during the time of the exemption. I understand that this exemption has a 12 month lifetime limit.	
I am requesting this exemption *if it is available to me.	
Financial Worker:	Phone number:
Name:	Case Number:
Signature:	Date: