

North Los Angeles County Regional Center

Main 818-778-1900 • Fax 818-756-6140 #200 Oakdale Avenue #100, Chatsworth, CA 91311 #www.nlacrc.org

## STATEMENT OF OBLIGATION

1. The applicant is presently providing social services to regional center consumers or other members of the community.

No	Yes
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If yes, indicate name, location, type and capacity of service(s).

2. The applicant is currently receiving or planning to apply for grants/funds from any source to develop social service programs?

	🗖 No		Yes			
lf yes,	indicate	name,	location,	type an	d capacity	of service(s).

3. The applicant or member of the applicant's organization or staff has received a citation from any agency for abuse (verbal, physical, sexual, fiduciary, neglect)?

	No		Yes
If yes, ex	plain in de	etail.	

4. Has the applicant or any member of the applicant's organization received a Corrective Action Plan (CAP), Sanction, notice of Immediate Danger, or an "A" or "B" citation, or any other citation from a regional center or State Licensing Agency?

		No			Yes
lf yes,	exp	lain in	detail	-	

5. Describe other professional/business obligations held by the Licensee and Administrator, including name, location, type, and capacity (time commitment) of each obligation. *Do not include services you propose to provide through this proposal.*