

## BOARD OF DIRECTOR STATEMENT

**IMPORTANT**– Before completing this page, please read the Application Instructions for a Home Care Organization License (HCS 281).

Licensees are required to provide evidence that every member of the board of directors understands his or her legal duties and obligations as a member of the board of directors and that the Home Care Organization's operation is governed by the laws and regulations that are enforced by the Department.

All members of the board of directors and prospective members of the board are required to read, complete, and sign the statement below as a condition of licensure.

I have read and understand my legal duties and obligations as a member or prospective member of the board of directors and I also understand that the Home Care Organization's operation is governed by laws and regulations that are enforced by the California Department of Social Services.

I declare that I have received a copy and I have read and understand the information contained in the Health and Safety Code Division 2, Chapter 13. I have also received a copy and have read the written directives released while the Department is finalizing the California Code of Regulations Title 22, Division 6, Chapter 10.			
1. HOME CARE ORGANIZATION NAME		2. HOME CARE ORGANIZATION NUMBER	
3. BOARD MEMBER/PROSPECTIVE BOARD MEMBER NAME (Print Clearly)		4. AREA CODE/TELEPHONE (    )	
5. BOARD MEMBER/PROSPECTIVE BOARD MEMBER HOME ADDRESS	6. CITY	7. STATE	8. ZIP CODE
9. SIGNATURE		10. DATE	

*Note: Boards of directors should ensure that they are informed of law and regulation changes.*