

Connecticut TANF ECF Intake Application

Organization Name: _____

Program Name: _____

1. Client Information

Name: _____
(first) (middle) (last)

Date of Birth: _____
(mm/dd/yyyy)

Address (P.O. Box is not acceptable):

(number and street) (apt. number)

(city) (state) (zip code)

Gender: M F
Social Security Number: _____
INS Number: _____
(if applicable)

2. Eligibility Criteria

Income:

- Current Recipient of TFA (Temporary Family Assistance)
- Current Recipient of SNAP (Food Stamps)
- Current Recipient of SAGA (State Administered General Assistance)
- Current Recipient of WIC (Women, Infants, and Children)
- Family income less than 75% of the State Median Income (SMI) Level

Family Income: \$ _____

Family Size: _____

Figures below represent 75% of the SMI for period July 1, 2010 through June 30, 2011.

- Family of 1 - Level less than \$39,640.77
- Family of 2 - Level less than \$51,837.93
- Family of 3 - Level less than \$64,035.09
- Family of 4 - Level less than \$76,232.25
- Family of 5 - Level less than \$88,429.41
- Family of 6 - Level less than \$100,626.57
- Family of 7 - Level less than \$102,913.54
- Family size over 7 - add \$2286.97 per family member

Household Composition:

- Custodial Parent (or pregnant) or other caretaker of dependent children
- Non-Custodial Parent (with children residing in Connecticut)
- Child under 19 yrs. old and lives with parent or relative

Citizenship Status:

- United States Citizen
- Permanent Resident* _____
(month/year became legal resident)
- Refugee, Asylee, or Deportation withheld
- Not a United States Citizen or Eligible non-citizen

* Attach copy of INS card.

3. Signatures

This information provided above is true and correct to the best of my knowledge.

Applicant Signature Date

Parent Guardian name (if applicant is under 16)

Parent or Guardian Signature

4. Tracking Information (for Office Use Only)

Applicant determined to be: TANF Eligible TANF Ineligible Undetermined

Was Applicant selected to participate? Yes No

Official Signature Date