Yurok Tribal TANF Program - Application for Assistance

Office: **Request Date:** **30 - Day Pending:**

☐ **Application for Initial Services** ☐ **12-Month Re-certification** ☐ **Update**

Applicant is Applying for: ☐ **Cash Assistance** ☐ **Diversion Services** ☐ **Employment Services**

Previous TANF Client: **NO** **YES** **Office:** **Other:**

Applicants Name: _____ Social Security Number: _____

Home Address: _____ Date of Birth: _____

Mailing Address: _____ Home Phone: _____

Tribal Affiliation: _____ Tribal Roll Number: _____ Message Phone: _____

List ALL household members who will be utilizing services

Full Name (First, MI, Last Name)	Social Security Number	Date of Birth	Age	Relationship	Sex	Marital Status	Education: Last grade Completed	Education: Highest Certificate	Disabled	Tribe

List ALL household members who WILL NOT be utilizing Program services

Do you pay rent? ☐NO ☐YES How much? _____ To who do you pay rent? _____

Do you own more than one vehicle? ☐NO ☐YES Value of each vehicle: _____

Have any other resources i.e., checking or savings account? ☐NO ☐YES Amount in all accounts? _____

Have you filed for unemployment? ☐NO ☐YES Are you: ☐Eligible ☐Not Eligible Date you applied: _____

List ALL household Income & Benefits received in the LAST SIX-MONTHS

Yurok Tribal TANF Program - Application for Assistance

Household Received:	☐USDA	☐Food Stamps	☐ OHP	☐Sect. 8	☐SIHA EA	☐ Higher Education
	☐State TANF	☐State DV-TANF	☐SSI	☐SSD	☐Utility Assistance	☐Child Support
	☐Unearned Income	☐Earned Income	☐Other	**Note: List all dollar amounts below.**		

Recipient's Name	Source	Type	Amount	Date Last Recived	Still Receiving?

Employment History

Employer's Name & Address	Area Code & Phone Number	Supervisor's Name	Type of Work	Dates of Employment	Reason for Leaving

Have you or any household member ever been convicted of a felony? ☐YES ☐NO If yes, please explain and attach documentation:_____

_____

_____

FEDERAL LAW GOVERNING FRAUD: "Whoever, in any matter within the jurisdiction of any department or agency of the United States, knowingly and willfully falsifies, conceals, or covers up any trick, scheme, or device, a material fact, or makes any false fictitious or fraudulent statement or entry, shall be fined not more than $10,000 or imprisoned more than five years or both."

Fraud in the Yurok Tribal TANF Program will lead to a negative and immediate termination from the Program.

I (we) have read, or heard, or have had interpreted to me (us) the proceeding provisions of law and understand them. I (we) agree to supply all necessary information about my (our) situation changes. I (we) also authorize the Yurok Tribal TANF Program to obtain information to establish my (our) eligibility for assistance. By my (our) signature, I (we) verify that all the above information reported on this application and oral information given is true and correct to the best of my (our) knowledge.

Signature of Applicant: _____ **Date:** _____

Signature of Spouse/Partner of Applicant OR Parent of a Minor Applicant: _____ **Date:** _____

Signature of YTTP Staff: _____ **Date:** _____