

PREVENTION, RETENTION & CONTINGENCY (PRC) School Clothing Voucher Application

	Agency ose only
Date Received	
Time Received	
Case Number	

Name of Applicant (Name of Applicant (Parent/Caretaker):			Telephone # wh	Telephone # where you can be reached	
Street Address:	City:		:	ZIP:		
Mailing Address (if o	lifferent from	above):	Email Address:		ss:	
SNAP Food *If no, you may If you are not re YES, I want Please complete the informall income, earned and/or	Assistance y still be eligible egistered to volto register to volto register to volto mation below the unearned (suc	OWF e but will nee te where you vote. for EVERYO ch as Wages,	live now, would y NO, I do not NE living in your I Social Security, VA	PRC Assist tification and verification and verification and verification with the register to	tion of income. gister to vote here today?	
ame st everyone in the household)	Relationship to Applicant	Birth Date	SSN	K-12 School / Grade Entering	Source of Income and Gross Monthly Amount	
rample Entry	Example	5/1/1990	000-00-0000	Delaware / 5	ABC Employer: \$2,150	
	SELF					
you are a Non-Custodial me	Parent, list yo	ur children's	names & addresse	es below:	K-12 School / Grade Entering	
	, (44) (33)		Sittli Butc	33.14	N 12 3011001 / Grade Effecting	



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I certify that I:

- 1. Have a minor/dependent child in my home or am pregnant.
- 2. Am a citizen of the United States or a qualified alien.
- 3. Have not fraudulently received assistance under any PRC, SNAP, Medicaid, TANF or OWF Programs.
- 4. Do not currently have any outstanding PRC, SNAP, Medicaid, TANF or OWF overpayment(s).
- 5. Am not a fugitive felon, probation/parole violator, or an incarcerated individual.
- 6. Am not a striker.
- 7. Am not an unmarried, non-graduate parent under the age of 18, or not attending high school or equivalent.
- 8. Have not fraudulently misrepresented residence in order to obtain assistance in two or more states.
- 9. Did not falsify my application or verification documents for PRC.
- 10. Will cooperate with any service plan connected to my PRC application.
- 11. Agree to indemnify and hold harmless the Delaware County Department of Job and Family Services from any and all occurrences, losses, damages, claims, suits, or contingent or direct liabilities that may arise as a result of any and all acts performed or that fail to be performed by an Independent Contractor rendering services I have requested on this application.

I certify all the above information and understand that my signature (or electronic signature) on this application provides Delaware County Department of Job & Family Services the authority to verify any/all information through any contacts necessary to determine my eligibility for the services I've requested.

The information to be exchanged includes but is not limited to: case data, employment verifications, work history, medical documentation, rent, mortgage and utilities, living arrangements, BMV and school training, enrollment, course work, tuition fees, attendance and grades. I am voluntarily signing this Release of Information. I hereby grant permission to Delaware County Job & Family Services to make whatever contacts necessary to determine eligibility and verify information provided on the application for assistance. I understand my right to privacy and hereby waive the right solely for the above purpose. This release is valid for one year from the date signed, and may be rescinded at any time; however, an individual cannot rescind consent retroactively. (ORC 5101.27)

Signature of Applicant/Parent/Caretaker	Date	

Monthly Federal Poverty Guideline amounts are used to determine income eligibility for PRC. The total gross countable income of all members of the assistance group (except earned income of a minor/un-emancipated child) must be equal to or less than 200% for the appropriate household size.

Current guidelines are available online at: jfs.co.delaware.oh.us