

**PORTAGE COUNTY  
DEPARTMENT OF JOB AND FAMILY SERVICES**

**PRC PLAN**  
**Prevention, Retention and Contingency**

**Effective 05/01/2012**

## TABLE OF CONTENTS

<b>PURPOSE.....</b>	<b>3</b>
<b>POLICY STATEMENT.....</b>	<b>3</b>
<b>EXPLORING COMMUNITY RESOURCES .....</b>	<b>4</b>
<b>ASSISTANCE GROUP COMPOSITION.....</b>	<b>5</b>
<b>PRC RESIDENCY REQUIREMENT .....</b>	<b>5</b>
<b>ECONOMIC NEED.....</b>	<b>6</b>
<b>TANF ASSISTANCE.....</b>	<b>6</b>
<b>PRC APPLICATION AND ELIGIBILITY .....</b>	<b>8</b>
<b>NOTICE OF APPROVAL OR DENIAL .....</b>	<b>8</b>
<b>SCOPE OF SERVICES.....</b>	<b>10</b>
<b>APPENDIX A: Federal Definition of Assistance .....</b>	<b>11</b>
<b>APPENDIX B: PRC Service/Benefits .....</b>	<b>12</b>
<b>APPENDIX C: FORMS .....</b>	<b>19</b>

## **PURPOSE**

The Prevention, Retention, and Contingency (PRC) Program, created by Ohio House Bill 408, is designed to serve low-income families who may or may not currently be receiving Ohio Works First (OWF) cash assistance. OWF encourages family self-sufficiency through employment while it meets temporary needs through cash assistance. The common thread between these programs is *self-sufficiency*, which is defined as the ability to sustain and maintain one's family independently, without need for or reliance on governmental or community agencies.

The PRC Program is a tool to encourage families to attain and retain employment, prevent dependency, and promote family stability within the context of community priorities and needs. PRC makes it possible to meet the needs of low-income families through supportive services and/or short-term cash-related payments so that they do not need OWF cash assistance. Specifically, PRC is defined as:

### **Prevention:**

*Prevent* families from having to apply for OWF cash assistance when crises arise.

### **Retention:**

Help family members *retain* employment by enhancing job skills, overcoming barriers, and providing short-term assistance or wage supplementation if necessary.

### **Contingency:**

Provide for *contingent* needs by helping families with one-time urgent problems that, if left unattended, could result in families' need of long-term public assistance.

In Portage County, this plan is a critical tool designed to provide assistance to needy families so that children may be cared for in their own home or in the homes of relatives to prevent dependency on governmental subsidies by promoting job preparation, work, and self-sufficiency, and to alleviate a family crisis that could lead to the removal of a child(ren) from their home.

## **POLICY STATEMENT**

The PRC program, as created under House Bill 408, is designed to provide benefits and services to needy families and low-income working families who are in need of help with essential supports to move out of poverty and achieve self-sufficiency. This program provides the Portage County Department of Job and Family Services (PCDJFS) with the flexibility to encourage employment and promote self-sufficiency. The program utilizes Federal Temporary Assistance for Needy Families (TANF) funds for those who have specific and immediate needs. While PRC in Portage County is not on-going OWF assistance, it is designed to include:

1. Services to families to allow an employed adult member to maintain employment and, thereby, achieve or continue self-sufficiency.
2. Employment-related services to OWF families that are at risk of reaching their 36-month time limit.
3. Supportive services to enhance family functioning and promote self-sufficiency.

4. Supportive services to at-risk youth including, but not limited to, employment and training.
5. Services to families in crisis involved with child protective services that could affect the removal from or safe return of a child(ren) to the home.
6. Services to families, elderly, and disabled individuals in the event that the Governor declares a disaster or state of emergency and supplemental funding for disaster-related PRC assistance and services are available.
7. Services to families to meet an emergent need caused by circumstances beyond applicant control, which, if not satisfied, threatens the safety, health, or well being of one or more family members.
8. Services to families experiencing family violence.

In Portage County, these services are provided through PRC preventative services: regular PRC assistance (including contingency services), PRC diversion, PRC supportive services, and PRC disaster assistance.

When appropriate, PCDJFS staff will provide applicants with referral information to access Medicaid, food stamps, child care assistance and other programs that could help them transition from welfare to work. The staff will also explain PRC eligibility factors, time constraints, and funds available for various supportive services.

Portage County will continuously provide fair and equitable treatment to families applying for PRC in accordance with the policies outlined in this document. Procedural guidelines detailing the application of these policies are available through PCDJFS. The scope of services outlined in Appendix A cannot be reduced, limited or restricted unless the Plan is amended.

### **EXPLORING COMMUNITY RESOURCES**

PCDJFS will use a portion of its PRC dollars to educate the community regarding program parameters, provide training, and establish interagency collaborations. Applicants, with the assistance of PCDJFS staff, must explore the availability of resources within the local community prior to the authorization of PRC. The application may be denied if the needed service is available through another resource.

The "local community", as it relates to PRC, may include areas beyond the County's boundaries. A PRC assistance group is required to utilize all other resources prior to applying and utilizing any PRC program, benefit, or support system that may reduce or eliminate the presenting need. Personnel determining eligibility for PRC should be aware of community resources that may be utilized to help meet the need. For PRC purposes, payment for Home Energy Assistance Program (HEAP)-eligible heating costs will not be authorized while HEAP is available. In the event that disconnection of service is imminent, a statement of approval/denial will be required from the HEAP administering agency prior to approval of utility expenses.

## **ASSISTANCE GROUP COMPOSITION**

An assistance group, as defined by the Ohio Revised Code (ORC) 5108.01, is a "group of individuals treated as a unit for purposes of determining eligibility for the prevention, retention, and contingency program". In Portage County, an assistance group for PRC services includes all household members residing at the same address and must include:

- a minor child  
Per ORC 5107.02(G), minor child means either of the following:
  - (1) an individual who has not attained 18 years of age; or,
  - (2) an individual who has not attained 19 years of age and is a full-time student in a secondary school or in the equivalent level of vocational or technical training; **or**,
- an emancipated minor (needs to provide court verification); **or**,
- a pregnant individual with no other minor children; **or**,
- a parent with shared custody of the minor child(ren) who lives in the county and who sometimes lives in the same household with the minor child(ren); **or**,
- non-custodial parent of a minor child who lives in the county but does not live in the same household as the minor child may apply for specific services only.

While a minor child in the assistance group is a requirement for PRC services, a child that is temporarily absent from the home in accordance with the timeframes established in OAC 5101:1-3-04 may be considered in the home for PRC eligibility purposes, if all of the following conditions are met:

1. The location of the absent child is known.
2. There is a definite plan set forth by Children Services for the return of the absent child to the home.
3. The absent child shared the home with the assistance group before the onset of the absence and receiving OWF (Ohio Works First) assistance prior to removal.
4. PRC benefits/services will assist with the return of the absent child(ren).

## **PRC RESIDENCY REQUIREMENTS**

To be eligible for PRC services, assistance groups must reside in Portage County and meet the residency requirement as outlined in section 5101:1-3-03 of the Ohio Administrative Code (OAC).

### **Section 5101:1-3-03 of the Ohio Administrative Code (OAC)**

#### **A. Residency Requirement**

- (1) Residence in the state is a requirement for OWF. Residence is established by a person who is living in Ohio voluntarily with the intention of making his home in Ohio. Residence may also be established by a person who is living in Ohio, is not receiving assistance from another state, and entered Ohio with a job commitment or seeking employment in Ohio, whether or not currently employed. A child is a resident of the state in which the parent, legal guardian, custodian or specified relative caring for the child is a resident.
- (2) Absence from the state for more than thirty days constitutes evidence of intent to establish residence elsewhere, unless a written statement has been submitted to indicate intent to return to Ohio. The written statement must be retained in the case record. The County Department of Job and Family Services shall consider such written statement as acceptable proof of intent to return to Ohio. A statement is not considered acceptable

proof of intent to return to Ohio when the applicant/recipient contradicts the statement by giving up Ohio living arrangements, applying for public assistance in another state, or securing long-term housing arrangements in another state.

Residency will be established by living in the county voluntarily with the intent to remain permanently or for an indefinite period of time. An applicant may also establish residency that is not receiving assistance in another state or county and who has entered the county with a job commitment, whether or not currently employed.

Individuals or families from areas affected by a national disaster as designated by the President of the United States must reside in Ohio voluntarily with the intention of making his/her home in Ohio. PCDJFS will presume intent to remain if the applicant is from an affected area and is uncertain whether they intend to remain (as stated in Family Stability letter 36 for OWF residency).

### **ECONOMIC NEED**

All household members must verify that for thirty (30) days prior to making application for the requested services, the actual total gross income was equal to or less than the Economic Need Standard established for each service/benefit. If all members of the PRC Assistance Group (AG) are the same as a currently active Public Assistance AG and if the Economic Need Standard for the Public Assistance program the AG is receiving is equal to or less than the Economic Need Standard for PRC, income verification may not be necessary.

All income that has been received by the household during the 30-day budget period is considered when determining financial need with the exception of the earned income of a minor child still in school. The only allowable deduction from the countable income is legally obligated children support payments paid via a wage withholding by a household member to or for a non-household member. This wage withholding must be verified. (OAC 5101:1-24-20)

Assistance groups are expected to use available community resources to meet the presenting need before accessing PRC services.

If the dollar amount owed on a specific requested PRC cash-related service exceeds either the individual cap for that service or the overall PRC maximum benefit available, the applicant will be responsible for paying any overages. Documentation that the applicant has paid, or made arrangements to pay their portion of requested service will be required before PRC payment will be processed.

For PRC Supportive Services, the receipt of federal means-tested benefits provides adequate verification that the assistance group has an economic need. Applicant must verify how this need will be met in future months.

There will be no established economic need standard for pregnancy prevention services and/or information and referral.

### **TANF ASSISTANCE**

In 1966 the Federal Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA)

authorized the TANF program in order to reduce the cyclical dependence on the welfare system. TANF encourages self-sufficiency for families through employment while meeting their basic needs through temporary cash assistance. Self-sufficiency is defined as being able to sustain and maintain one's family independently without need for, or reliance on, government or community agencies. Four (4) core goals comprise TANF:

1. Provide assistance to needy families so children may be cared for in their own home or in the homes of relatives.
2. End dependence of needy parents by promoting job preparation, work, and marriage.
3. Prevent and reduce out-of-wedlock pregnancies and establish goals for preventing and reducing the incidence of these pregnancies.
4. Encourage the formation and maintenance of two-parent families.

With the authorization of the TANF program each State in the union was charged with developing a plan for implementing this wide-sweeping reform of the welfare system. Ohio's TANF response created the Ohio Works First (OWF) program in 1997, through House Bill 408.

PRC services provided by PCDJFS are customized to fit the individual assistance group. Services must relate directly to the promotion and achievement of self-sufficiency in accordance with Federal Regulation 45 CFR 260.31. See Appendix B for specific guidance.

PCDJFS will serve both OWF participants and other needy families as specified in this PRC Plan. PCDJFS will not provide medical services under this program except for pre-pregnancy family planning services. When appropriate, the PRC applicant will be given the opportunity to select providers and/or vendors. Under no circumstances will an employee of the Portage County Department of Job and Family Services be an approved vendor.

**PRC applicants discovered to have fraudulently received or improperly disposed of services and/or benefits will be required to reimburse Portage County Department of Job and Family Services for the full amount of the services and/or benefits and may be subject to prosecution. Applicants currently sanctioned for non-compliance with an OWF self-sufficiency contract are ineligible for PRC services with the exception of the PRC supportive services offered under child welfare, domestic violence situations or contracted services for noncustodial parents. Applicants currently having a client caused overpayment of any kind after October 1, 1997 are ineligible for PRC.**

**IN THE EVENT THAT AN EMERGENCY DISASTER THREATENS OR INCAPACITATES OPERATIONS AT PCDJFS, THE PRC PLAN WILL BE TEMPORARILY SUSPENDED.**

## PRC APPLICATION AND ELIGIBILITY

Applicants are required to complete an application and provide all necessary verification. Applicants must have a clearly defined need and demonstrate that receipt of the service will promote their goal of self-sufficiency. Eligibility is dependent on the family unit's verified need and the determination that PRC assistance will satisfy the need. Eligibility for PRC benefits or services is not automatic. Any subsequent PRC applications for regular PRC received within thirty (30) days of the initial application shall be marked as duplicate and filed in the PRC file.

Regular PRC services/benefits are available to an eligible applicant once in a 12-month period per service. Some services are only available once in 24-months, 36-months, 10 years, or once in a lifetime based on the application date.

### **PRC Application and Eligibility Points of Interest:**

1. In order for the PRC applicant to be found eligible, the gross income of the complete household must be at or below 200% of the current Federal Poverty Guidelines (FPG) which are updated and distributed by Ohio Department of Job and Family Services every February.
2. Properly submitted applications for PRC Program assistance shall be approved or denied within thirty (30) days after all necessary verifications are received by PCDJFS. Applications where the verifications are not received within thirty (30) days will be denied.
3. Social security numbers of each member of the household must be provided on the application. The applicant may be required to provide:
  - verification of household composition
  - age of each individual
  - driver's license or state ID for applicant
  - school attendance (for children age 18-19).
4. All income received by all household members during the past thirty (30) days will be considered and verified in determining eligibility. If all members of the PRC Assistance Group (AG) are the same as a currently active Public Assistance AG and if the Economic Need Standard for the Public Assistance program the AG is receiving is equal to or less than the Economic Need Standard for PRC, income verification may not be necessary.
5. Applicant family must make every effort to explore the availability of financial and/or services within the state of Ohio prior to approval of PRC program services.
6. Applicants will be asked on the PRC application if he/she would like to apply to register to vote. Applicant will mark the appropriate checkbox. If applicant does not check either box, he/she will be considered to have decided not to register to vote at that time. Applying to register or declining to register to vote will not affect the amount of assistance that applicant will be provided by the agency.
7. PRC services must be used within ninety (90) days of the date the PRC application is approved. If the applicant still is in need of the service and wants assistance from the PRC program after

ninety (90) days, a new application must be filed.

Applicants for PRC are responsible for completing all necessary documents, furnishing all available forms and information, and cooperating in the eligibility determination process. Applicants must utilize all available income and resources in meeting the presenting need. Applicants are eligible if they meet all eligibility requirements on the date of application.

The application can be denied for failure to meet the eligibility requirements, failure to cooperate, quit a job within the past sixty (60) days, failure to demonstrate employment or participation in a work-related activity, failure to provide information needed to determine eligibility within thirty (30) days of the application filing date or serving a current sanction. Final approval of the PRC request is based on established guidelines as included in the PRC plan, availability of PRC funds, and subject to the approval of the Director/Designee. The applicant's signature on the PRC application will serve to authorize the exchange of information between PCDJFS and the designated provider.

### **INELIGIBILITY**

The following individuals are automatically ineligible for PRC assistance:

1. Fugitive felons and probation and/or parole violators.
2. An individual who is not a U.S. citizen or a qualified alien.
3. Individuals with any outstanding client caused overpayment balance from after October 1, 1997 until the member of the assistance group repays the cost of the claim.
4. Individuals ineligible for other programs due to deliberate noncompliance with the terms of their assistance including sanctions and job quits.
5. An individual who is failing to cooperate with the Child Support Enforcement Agency in establishing paternity or securing support.
6. A parent under 18 not attending high school or equivalent, if they have not graduated from high school.
7. An unmarried parent under 18 not living in a supervised setting unless emancipated.
8. A person who fraudulently misrepresents residency in order to obtain assistance in two or more states.
9. Families who do not use their own resources to help meet their needs.
10. Families giving false or incorrect information.

**PRC SCOPE OF SERVICES PROVIDED**

The attached tables contain the scope of services provided under the PRC Program in Portage County (see Appendix A). The tables also contain the assistance groups served, the economic need standards, caps placed on the services, and the targeted groups. The identification of the targeted groups is essential in customizing service delivery specific to the family's circumstances.

Portage County Department of Job and Family Services reserve the right to amend this Plan as needed. Portage County Department of Job and Family Services agree to implement the PRC Program as described above, amended April 26, 2012 and effective May 1, 2012.

  
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Judee L. Genetin, Director  
Portage County Department of Job & Family Services

4/26/2012

Date

  
\_\_\_\_\_  
David Shea, Chairperson  
Community Planning Committee

4/26/2012

Date

**APPENDIX A: Federal Definition of Assistance**

Section 260.31 of the Federal Regulations published on October 1, 2001 defines "assistance" as follows:

- (a) (1) The term "assistance" includes cash, payments, vouchers, and other forms of benefits designed to meet a family's ongoing basic needs (i.e., for food, clothing, shelter, utilities, household goods, personal care items, and general incidental expenses).
- (2) It includes such benefits even when they are:
- (i) Provided in the form of payments by a TANF agency, or other agency on its behalf, to individual recipients; and
  - (ii) Conditioned on participation in work experience or community service (or any other work activity under Sec. 261.30 of this chapter).
- (3) Except where excluded under paragraph (b) of this section, it also includes supportive services such as transportation and child care provided to families who are not employed.
- (b) It excludes:
- (1) Nonrecurring, short-term benefits that:
    - (i) Are designed to deal with a specific crisis situation or episode of need;
    - (ii) Are not intended to meet recurrent or ongoing needs; and
    - (iii) Will not extend beyond four months.
  - (2) Work subsidies (i.e., payments to employers or third parties to help cover the costs of employee wages, benefits, supervision, and training);
  - (3) Supportive services such as child care and transportation provided to families who are employed;
  - (4) Refundable earned income tax credits;
  - (5) Contributions to, and distributions from, Individual Development Accounts;
  - (6) Services such as counseling, case management, peer support, child care information and referral, transitional services, job retention, job advancement, and other employment-related services that do not provide basic income support; and
  - (7) Transportation benefits provided under a Job Access or Reverse Commute project, pursuant to section 404(k) of the Act, to an individual who is not otherwise receiving assistance.
- (c) The definition of the term assistance specified in paragraphs (a) and (b) of this section:
- (1) Does not apply to the use of the term assistance at part 263, subpart A, or at part 264, subpart B, of this chapter; and
  - (2) Does not preclude a State from providing other types of benefits and services in support of the TANF goal at Sec. 260.02(a).

## APPENDIX B: PRC Services and Benefits

The client is responsible for paying all amounts in excess of the maximum payments listed herein. **All services are limited to 200% of FPG.**

### Employment-Related Expenses

- Limited to five hundred dollars (\$500) for job-support tools/equipment or supplies.
- Limited to five hundred dollars (\$500) for licenses required to obtain or maintain employment in a field.
- Limited to five (5) uniforms not to exceed five hundred dollars (\$500) for job-specific uniforms.

#### Requirements:

- Completed PRC application
- Copy of dress code or statement from employer, or prospective employer, as to required uniforms and tools/equipment.
- Must submit an invoice or other document from store provider listing each item separately and price for each item.
- Any other supportive evidence (e.g. diploma, certificate from vocational school, etc.).

**Duration:** Eligible for services once in a twelve (12) month period. The twelve (12) month period begins on the date of application.

### Education Proficiency

- Limited to youth, ages 14 - 19, in need of extra schooling/tutoring in order to graduate, advance to the next grade, or pass the Proficiency test.
- Limited to actual cost of schooling not to exceed five hundred dollars (\$500).

#### Requirements:

- Completed PRC application.

**Duration:** Eligible for services once in a twelve (12) month period per child. The twelve (12) month period begins on the date of application.

### Adult Education

- Limited to adults that are in need of education or training to become self sufficient.
- Limited to up to four (4) months of actual cost not to exceed one thousand dollars (\$1,000).
- Service will include Adult Basic Education, GED Preparation, Occupational Training and/or Short-Term Education Programs

#### Requirements:

- Completed PRC application.
- Verification of ineligibility for WIA program (unless applying for GED Preparation)
- Education and/or training must be a part of applicant's Self-Sufficiency Plan OR applicant must participate in the Soft Skills courses at the Portage Workforce Connection.

**Duration:** Eligible for services once in a lifetime per individual.

### Utility Assistance

- With the exception of water, applicants must apply for HEAP assistance during the HEAP heating season and PRC funds will be utilized only during non-HEAP months.
- The agency will always pay the minimum amount necessary to restore service to regulated utilities. This may include a reconnect fee that is required if service has been shut off at the

same address.

- Limited to six hundred dollars (\$600), not including administrative fees.
- Limited to electric, gas, fuel oil, propane and water.

**Requirements:**

- Completed PRC application.
- Furnish original utility bill in the name of the applicant, spouse, or parent of child in the PRC assistance group.
- If utility is in the landlord's name, verification that the utility is the applicant's responsibility is required.
- Requested service must have a disconnection notice, or be at least thirty (30) days past due.
- Verification of attempts to pay has been made.
- Applicant must be referred to budget counseling services.

**Requirements for Gas and Electric:**

- During the duration of the program, all customers of regulated utilities will be forwarded for enrollment in the Percentage of Income Payment Plan (PIPP Plus) or another utility sponsored payment plan. Maximum payments will be based on the minimum amount required to prevent disconnection or to restore services and maintain PIPP Plus program enrollment and could include PIPP Plus default amounts and/or PIPP Plus monthly payment requirements.

**Duration:** Eligible for services once in a twenty-four (24) month period. The twenty-four (24) month period begins on the date of application.

**Home Repairs**

- Limited to two thousand five hundred dollars (\$2,500), not including administrative fees, in emergency repairs that directly affect the health and safety of the family and are limited to electric, plumbing, heat and accessibility problems.

**Requirements:**

- Completed PRC application.
- Furnish deed/land contract, or other proof of home ownership in the name of the applicant, spouse, or parent of child in the PRC assistance group.
- Repair need must be identified and verified by an approved contractor, selected through open procurement, as necessary for the health and safety of the family.
- Provide proof that homeowners insurance will not cover repairs.

**Duration:** Eligible for services once in the applicant's lifetime.

**Child(ren) Cribs**

- Crib per child not to exceed two hundred fifty dollars (\$250).

**Requirements:**

- Completed PRC application.
- Must submit an invoice or other document from store provider listing each item separately and price for each item.
- Verification of urgency.
- If a pregnant woman is applying for her unborn child, she must be in the last trimester of her pregnancy.

**Duration:** Eligible for one per child under the age of two (2) years unless verification of disability is provided.

### **Legal Services**

- Limited to families in need of the legal services in the PRC plan.
- Limited to twelve (12) months of actual cost not to exceed three thousand dollars (\$3,000)

#### **Services are for:**

- Driver's License Suspension removal
- Criminal Record Expungement
- Bankruptcy Filing
- Consumer Debt
- Help to obtain guardianship or custody for Kinship Care only
- Loss of housing issues (Foreclosures & Evictions)
- Public Benefits (SSI, SSDI & Unemployment)

#### **Requirements:**

- Completed PRC application.

**Duration:** The application is valid up to twelve (12) months from the application date. The twelve (12) month period begins on the date of application at Community Legal Aid Services.

### **Relocation Benefits**

- Limited to applicants who are victims of domestic violence or have an emergent need caused by circumstances beyond applicant's control which, if not satisfied, threatens the safety or health of one or more family members.
- Limited to one thousand five hundred dollars (\$1,500) once in a lifetime per family.

#### **Requirements:**

- Completed PRC application.
- Verification of a protection order in place or some other means of verification.

**Duration:** Eligible for services once in a lifetime.

### **Domestic Violence Services**

- Limited to eligible assistance groups of domestic violence.
- Limited up to two thousand dollars (\$2,000) per family for case management and twelve thousand dollars (\$12,000) per family for shelter services.

#### **Requirements:**

- Completed PRC application; **or**,
- Referral from PCDJFS case manager within the Self-Sufficiency Plan that PRC assistance is needed for, or to maintain, reunification; **and/or**,
- Status of reunification plan and/or statement from Children Services worker; **and/or**,
- Statement/referral from Domestic Relations Court or Family Counselor.

**Duration:** Eligible for services as needed on a daily basis for each family member not to exceed four (4) months in a twelve (12) month period.

### **Homeless Shelter Services**

- Limited to services for homeless families who are in need of housing, outreach, advocacy, case management, child advocacy, housing placement assistance, employment readiness training, skill development and service coordination assistance.
- Limited up to twelve thousand dollars (\$12,000) for shelter services per family.
- In the event the homeless shelter is full at time of application, families may be provided an additional ten (10) nights in a local motel/hotel not to exceed a total of five hundred fifty

dollars (\$550).

**Requirements:**

- Completed PRC application.
- HESS (Housing and Emergency Support Services) must identify as homeless and in need of services.

**Duration:** Eligible for services on a daily basis for each family member not to exceed sixty (60) days in a twelve (12) month period. The twelve (12) month period begins on the date the application is received by PCDJFS.

**Child Safety Kits**

- Limited to PRC eligible families with children three (3) years or younger.
- Limited to essential items to keep children safe in homes.
- Limited to total cost not to exceed two hundred fifty dollars (\$250), not including administrative fees, per family.

**Requirements:**

- Completed PRC application.

**Duration:** Eligible for services once in a lifetime.

**Family Disaster Assistance**

- Limited to families sustaining disaster.
- Limited up to one thousand five hundred dollars (\$1,500) or as limited by the state.
- Limited to Shelter Assistance, Home Repairs, and Replacement of essential Household Contents.

**Requirements:**

- Completed PRC application or designated Disaster application.
- Provide proof that homeowners or renters insurance will not cover cost of Shelter Assistance, Home Repairs, or Replacement of essential Household Contents.
- Submit copy of Police/Fire Chief report indicating fire, flood, etc.; **or**,
- Submit copy of report/referral from local American Red Cross Chapter, FEMA, or local EMA; **or**,
- Submit copy of report from utility company indicating fire, explosion, etc.

**Duration:** Eligible for services as needed.

**Emergency Clothing**

- Limited to urgently needed clothing for children not to exceed two hundred fifty dollars (\$250) per child.
- **Must be referred to the Clothing Center prior to approval of this service.**

**Requirements:**

- Completed PRC application.
- Must submit an invoice or other document from store provider listing each item separately and price for each item.
- Verification of urgency.
- Must be due to a natural or residential disaster, reunification with parents or victims of domestic violence.

**Duration:** Eligible for services once in a twelve (12) month period. The twelve (12) month period begins on the date of application.

### **Academic Support Services**

- Limited to required vocational fees, tools and uniforms for school age children in grades 9 through 12 who do not qualify for free lunch.
- Limited to five hundred dollars (\$500) per academic year.

#### **Requirements:**

- Completed PRC application.
- Letter from the school verifying that the student has fees incurred and amount of fees.

**Duration:** Eligible for services as needed.

### **Transportation Services**

- Limited to three (3) months of service.
- Bus Tokens/Passes for employment-related services in each month for a maximum of three (3) months.
- Limited up to a two hundred dollar (\$200) value per month in Gas Cards for employment-related services for a maximum of three (3) consecutive months from date of PRC approval.

#### **Requirements:**

- Completed PRC Application.
- Verification of current employment or offer letter with start date.

#### **Additional information needed if applying for Gas Card:**

- Present valid Ohio State driver's license.
- Provide proof of current auto insurance coverage in the name of the applicant, spouse, or parent of child in the PRC assistance group.
- Provide registration or title in the name of the applicant, spouse, or parent of child in the PRC assistance group.
- Employment required at a minimum of thirty (30) hours weekly at minimum wage.

**Duration:** Eligible for services twice in a twelve (12) month period. The twelve (12) month period begins on the date of application.

### **Child Welfare**

- In-Home Based Services or respite services as determined necessary by Portage County Children Services worker.
- Other services that may be essential to the PRC AG to secure or maintain employment, ensure the health and safety of children, prevent the removal of children from the household, maintain a permanent placement (i.e., kinship) or for the reunification of children with their family or relative as authorized by the Portage County JFS Director or her designee.

#### **Requirements:**

- Completed PRC Application or a Common Application Form.

### **Child Support Enforcement Agency (CSEA) Supportive Services**

- CSEA case management services designed to support individuals and track, monitor and report outcomes. Employment and training support activities designed to obtain or retain employment or improve employment activities.
- Non-custodial parent with a minor child. Non-custodial parent must be an Ohio resident. The Court or Administrative Seek Work Order will serve as the application.
- Non-custodial parent with a minor child in the Child Support Enforcement system who has court or administrative ordered child support obligation. Individual is an unemployed or underemployed Ohio resident.

### **Fatherhood Initiative**

- Limited to non-custodial father to help him meet his obligations as a parent.
- Limited to two thousand dollars (\$2,000) per family.
- Services may include individual and/or group sessions, monthly meetings, support group, referral, and case management.

#### **Requirements:**

- Completed PRC application.

**Duration:** Not to exceed four (4) months in a twelve (12) month period. The twelve (12) month period begins on the date of application.

### **Information and Referral**

Activities that identify and communicate available resources by public and private providers including a brief assessment of customer needs (not including diagnosis and evaluation) to facilitate appropriate referral to community resources.

### **TANF Summer Youth Employment Program**

- Effective during the period June 1, 2012 – August 31, 2012.
- Limited to Portage County youth, ages 14 – 24, in families already receiving TANF cash assistance (service priority) or in any TANF-eligible family, who are seeking employment or job skills.
- TANF funds for this program may be used for subsidized wages plus transportation and other supportive services.
  - Youth will be paid at a rate not to exceed the State of Ohio minimum wage, at no more than 40 hours per week. Subsidized wages plus any applicable payroll taxes shall not exceed four thousand five hundred dollars (\$4500), not including administrative fees. Performance bonuses or lump sum payments are not allowed.
  - Transportation for employed youth for the purpose of attending work or training shall not exceed five hundred dollars (\$500) per youth, not including administrative fees.
  - Other supportive services for employed youth (education, training, counseling or other employment related services) shall not exceed a total of five hundred dollars (\$500) per youth, not including administrative fees.

#### **Requirements:**

- The types of persons that may be served include:
  - Youth ages 14-17, as long as the youth is a minor child in a needy family and is in school as of June 1, 2012 or date of application, whichever comes later (youth may be 18 if they are a full-time student in a secondary school);
  - Youth ages 18-24, as long as they are in a needy family that also has a minor child;
  - Youth ages 18-24 that have a minor child and are considered needy;
  - Youth served may be non-custodial parents as long as they are considered “needy” and have a minor child. “Needy” is not specifically defined by the state or federal regulation but may be no greater than income at 200% of the federal poverty level.
- Completed TANF Summer Youth Employment Program Application.

**APPENDIX C: FORMS**

PRC Application (also used for disaster assistance)

OWF 7200 Application Form

TANF Summer Youth Employment Program Application

**If you are not registered to vote where you live now, would you like to apply to register to vote here today?**

**YES, I want to register to vote.**

**NO, I do not want to register to vote**

**If you do not check either box, you will be considered to have decided not to register to vote at this time. Applying to register or declining to register to vote will not affect the amount of assistance that you will be provided by this agency.**

**PORTAGE COUNTY JOB AND FAMILY SERVICES  
PREVENTION, RETENTION AND CONTINGENCY PROGRAM APPLICATION (PRC)**

Applicant Name \_\_\_\_\_ Current Address \_\_\_\_\_

Telephone Number(s) \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

List all members of your household (everyone that lives at the above address)

NAME	SOCIAL SECURITY #	DATE OF BIRTH	INCOME
Self			

Any person who is eighteen (18) years or older or emancipated with at least one minor child and/or pregnant and must also be a resident of Portage County can apply for PRC services. Pregnancy must be verified.

**Please answer the questions below:**

Is anyone in the household employed, if so, where? \_\_\_\_\_ Hours per week \_\_\_\_\_

Have you quit a job in the past 60 days, if so why? \_\_\_\_\_

Are you currently under any type of sanction through Job and Family Services? \_\_\_\_\_ Yes \_\_\_\_\_ No

What is the cause of your current situation? \_\_\_\_\_

What other agencies have you contacted for assistance with this emergency? \_\_\_\_\_

If you are eligible, the agency will limit assistance under this program to the actual documented amount of need, or the amount restricted for a specific service, or whichever is lower.

**WARNING: By my signature below, I declare and state under penalty of perjury that the information on this application is true and complete to the best of my knowledge. I understand that the law provides penalty of fine and imprisonment (or both) for anyone convicted of accepting assistance he or she is not eligible for. Also, by my signature, I acknowledge that final approval of my PRC request is based on the established guidelines, availability of PRC funds, and is subject to the approval of the Director/Designee. I authorize the exchange of information between PCDJFS and the providers. I understand that all information contained in this application is confidential.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Effective 01/26/12  
Revised 02/16/12

**EMERGENCY SERVICES\* - PLEASE CHECK WHICH SERVICE IS YOUR EMERGENT NEED:**

- |   |   |
|---|---|
| 3. _____ EMPLOYMENT EXPENSES (tools, licenses, uniforms)      | 14. _____ RELOCATION  |
| 4. _____ EDUCATION PROFICIENCY (Ages 14-19)                   | 15. _____ DOMESTIC VIOLENCE                                   |
| 5. _____ ADULT EDUCATION                                      | 17. _____ HOMELESS SHELTER                                    |
| 6. _____ UTILITY ASSISTANCE: <b>Check applicable utility:</b> | 19. _____ CHILD SAFETY KIT (3 years or younger)               |
| <input type="checkbox"/> Gas                                  | 23. _____ FAMILY DISASTER                                     |
| <input type="checkbox"/> Electric                             | 25. _____ CLOTHING – Reunification/Disaster/Domestic Violence |
| <input type="checkbox"/> Bulk Fuel                            | 28. _____ ACADEMIC SUPPORT                                    |
| <input type="checkbox"/> Water                                | 29. _____ TRANSPORTATION (Gas Card/Bus Pass) –                |
| 7. _____ HOME REPAIRS (Home ownership required)               | <b>Employment Required</b> (30 hrs. weekly minimum)           |
| 10. _____ CRIBS (Under the age of 2 or verified disability)   |   |
| 12. _____ LEGAL AID - Please call 800-998- 9454               |   |

**ELIGIBILITY DETERMINATION**  
(For Agency Use Only)

INCOME		PUBLIC ASSISTANCE INCOME	
GROSS WAGES/30 DAYS PRIOR TO APPL.		OWF GRANT	
		UNEARNED INCOME	
TOTAL		TOTAL	
PRC/ FPG FOR HH SIZE OF \$ _____		APPROVED DATE _____ DENIAL DATE _____	
DATE OF APPLICATION _____		30 DAY BUDGET PERIOD FROM _____ TO _____	

CONTRACTED AGENCY: \_\_\_\_\_

APPROVED DATE \_\_\_\_\_ DENIAL DATE \_\_\_\_\_ REASON \_\_\_\_\_

ADDITIONAL INFORMATION NEEDED IS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**FEDERAL POVERTY GUIDELINES EFFECTIVE 1/26/2012**

HOUSEHOLD SIZE OF: 2	\$2,522.00
3	\$3,182.00
4	\$3,842.00
5	\$4,502.00
6	\$5,162.00
7	\$5,822.00
8	\$6,482.00

\_\_\_\_\_  
Staff Signature/Date

\*The numerical order of the Emergency Services correlates to the numerical order in the PRC database and cannot be changed.

# REQUEST FOR CASH, FOOD, AND MEDICAL ASSISTANCE

## 1. VOTER REGISTRATION APPLICATION ATTACHED- ASSISTANCE AVAILABLE

If you are not registered to vote where you live now, would you like to apply to register to vote here today?  
 YES, I want to register to vote.  NO, I do not want to register to vote.  
**If you do not check either box, you will be considered to have decided not to register to vote at this time.**

## 2. Tell us about you (the applicant)

Complete this section for you or for the person for whom you are applying.

### Office Use Only

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_  
 Last Name \_\_\_\_\_

Date Received: \_\_\_\_\_  
 Application Number: \_\_\_\_\_  
 Case Number: \_\_\_\_\_  
 Expedited Food Assistance:  Yes  No  
 PRC Requested:  Yes  No  
 Child Care Requested  Yes  No

**Are you:** **Do you need any of the following services?**  
 Visually Impaired  Interpreter  Other: \_\_\_\_\_  
 Hearing Impaired  Sign Language \_\_\_\_\_

**Have you, or anyone living with you, ever received cash, food, or medical assistance?**  Yes  No  
 If yes, who: \_\_\_\_\_ Where (City/County/State): \_\_\_\_\_

## 3. Tell us how to reach you

Complete this section for you or for the person for whom you are applying.

Street Address  Check here if you are homeless

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Best Time to Call \_\_\_\_\_ Additional Phone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_  
 ( ) ( )

**Mailing Address (if different):**

Street Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

## 4. Tell us if you are an authorized representative

An authorized representative is someone who assists the applicant by completing the application process. If you are filling out this form as an authorized representative, please fill out the following.

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Best Time to Call \_\_\_\_\_ Additional Phone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_  
 ( ) ( )

## 5. Sign Here

Signature of Applicant or Authorized Representative \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

**6. Tell us if you need food assistance right away**

These questions will help us decide if you qualify to get food assistance benefits quicker.

How many people live with you and buy, fix, and eat meals with you? \_\_\_\_\_

Answer the following questions for only the people who buy, fix and eat meals with you.

Is your total gross income before taxes for the current month less than \$150?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Is your total net income after taxes and paying for such things as housing costs, child/dependent care costs, or child support payments for the current month zero?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are your total resources in cash, checking, and savings accounts less than \$100?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are your monthly rent or mortgage and utilities (such as gas, electric, water, and phone) more than your total monthly gross income before taxes?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Are you a migrant or seasonal farm worker?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

**7. Tell us about the people in your home**

You must list everyone who lives with you even if they are not applying. Please be sure to list your name first. If you need more space, attach a separate piece of paper.

- **Social Security Number:** You only have to list a social security number for someone who is applying for cash, food, or medical assistance. You do not have to provide a social security number for someone applying for alien emergency medical assistance.
- **U.S. Citizen:** You only have to indicate if someone is a U.S. citizen if they are applying for cash, food, or medical assistance.
- **Sex (gender):** If your household is only applying for food assistance, you do not have to complete the sex (gender) question.
- **Race/Ethnicity:** Title VI of the Civil Rights Act of 1964 allows us to ask for racial/ethnic (Hispanic or Latino) information. If you do not want to give us this information, it will have no effect on your case. If you do not give us this information, the worker will enter an answer.

Name (First, Last)	Relationship to You (spouse, son, friend, etc.)	Social Security Number	Date of Birth	Sex Write M or F	U.S. Citizen Write Y or N	Race	Hispanic or Latino Write Y or N
	Self						

Are you married?  Yes  No Spouse's name \_\_\_\_\_

Are you, or anyone you are applying for, pregnant? Only answer if applying for cash or medical assistance.

Yes  No If yes, who? \_\_\_\_\_

Do you, or anyone you are applying for, need nursing home / in-home care?

Yes  No If yes, who? \_\_\_\_\_

What is your preferred language? Spoken \_\_\_\_\_ Written \_\_\_\_\_

**7. Tell us about the people in your home (continued)**

**Is anyone 60 years of age or older?**  Yes  No  
 If yes, answer the questions in this section. If no, please skip to question 7.

**Is this person(s) receiving disability benefits?**  Yes  No  
 If yes, from what source? \_\_\_\_\_

**Is this person(s) unable to prepare meals due to a disability?**  Yes  No

**If you answered "Yes" to the last three questions, does this person(s) wish to receive food assistance separately from the other people you live with?**  Yes  No

**8. Tell us about your finances**

**Will you or the people in your home receive income this month?**  Yes  No  
 Income refers to all the money that you and the people in your home receive such as earnings from employment, child/spousal/medical support, disability benefits, retirement benefits, Workers' Compensation, Social Security, SSI, Veterans Benefits, etc.

If yes, please complete the table below.

Name	Type of Income	Amount of Income (before taxes)	How Often Received (weekly, bi-weekly, etc)	Date Last Received

**How much do you and the people in your home have in cash, checking, or savings (such as bank accounts, annuities, stocks, or bonds)?**  
 Give your best estimate of the total: \$ \_\_\_\_\_

**Did anyone in your home leave a job or lose a job within the last 60 days?**  Yes  No  
 If yes, who? \_\_\_\_\_ When? \_\_\_\_\_  
 For what reason? \_\_\_\_\_

**Is anyone in your home on strike from a job?**  Yes  No  
 If yes, who? \_\_\_\_\_

**9. Tell us about your expenses**

**Which expenses do you and the people in your home pay? Check all that apply. List the amount for each expense.**

**Day care costs for a child or other dependent(s)**  
 Estimated amount paid per month: \$ \_\_\_\_\_  
 If you need help with child care costs, contact your local CDJFS for a child care application.

**Child/spousal/medical support payments**  
 Estimated amount paid per month: \$ \_\_\_\_\_

**Medical expenses for anyone who is disabled or age 60 or older.** These include expenses such as medical bills, prescriptions, health insurance premiums, or other medical services. Do not include any medical support payments you entered in the check box above. Estimated amount paid per month: \$ \_\_\_\_\_

**Rent / Mortgage payments**  
 Estimated amount paid per month: \$ \_\_\_\_\_

**Utilities – Please check the utilities you pay for below.**

**Do you pay for heating and/or air conditioning?**  Yes  No

Gas  Electricity  
 Telephone  Water  
 Garbage  Sewer  
 Other

**10. Signature of person who completed this application**

**By signing this application:**

- I understand the questions on this form and certify, under penalty of perjury, that all my answers are correct and complete to the best of my knowledge, including information about the citizenship or alien status of each household member applying for assistance.
- I state under penalty of perjury I have disclosed all annuities and other similar financial devices in which I and/or my spouse have any interest.
- I understand and agree to provide documents to prove what I have said.
- I understand and agree that the CDJFS may contact other persons or organizations to obtain the necessary proof of my eligibility and level of assistance.
- I understand that by signing this application and receiving Ohio Works First, I am assigning to the State of Ohio any rights to child/spousal support that is owed to me and/or the minor children in the assistance group during the Ohio Works First eligibility period.
- I understand that by signing this application and receiving Medicaid, I am assigning to the State of Ohio any rights to medical support and any rights to payments by a liable third party for medical assistance owed to me and/or to the minor children in the assistance group during the Medicaid eligibility period.
- I understand that I may be required to cooperate with the child support enforcement agency in establishing paternity or establishing or enforcing a support order. If I am required to cooperate with the child support enforcement agency, a referral will be submitted to the agency on my behalf. I also understand that if I am not required to cooperate with the child support enforcement agency, I may request child support services by completing the JFS 07076 "Application for Child Support Services."
- I understand that in some instances, I may be asked to give consent to the CDJFS to make whatever contacts are necessary to determine my eligibility.

Signature of Applicant or Authorized Representative	If Authorized Representative, Relationship to Applicant	Date

**11. What to do when you complete this application**

**Return this application to your local County Department of Job and Family Services office.**

**Your civil rights**

Federal law and the policies of the U.S. Department of Agriculture (USDA), the U.S. Department of Health and Human Services (HHS), the Ohio Department of Job and Family Services (ODJFS) and the local County Department of Job & Family Services (CDJFS) say that we must not discriminate on the basis of race, color, national origin, sex, age, or disability. Under the Food and Nutrition Act and USDA policy, discrimination is prohibited also on the basis of religion or political beliefs.

To file a discrimination complaint, write or call USDA, HHS, or ODJFS.

Write or Call:	Write or Call:	Write or Call:
<p><b>USDA</b>                      Director, Office of Civil Rights                      Room 326-W, Whitten Building                      1400 Independence Avenue, S.W.                      Washington, D.C. 20250-9410                      (202) 720-5964 (voice and TDD)</p>	<p><b>HHS</b>                      Region V, Office of Civil Rights                      233 N. Michigan Ave., Suite 240                      Chicago, Illinois 60601                      (312)886-2359 (voice)                      (312) 353-5693 (TDD)                      (312)886-1807 (fax)</p>	<p><b>ODJFS</b>                      Bureau of Civil Rights                      30 E. Broad St., 37th Floor                      Columbus, OH 43215                      (614) 644-2703 (voice)                      1-866-227-6353 (toll free)                      (614) 752-6381 (fax)                      1-866-221-6700 (TTY)</p>

USDA, HHS, and ODJFS are equal opportunity providers and employers.

# Voter Registration Form

Please read instructions carefully. Please type or print clearly with blue or black ink.  
For further information, you may consult the Secretary of State's Web site at: [www.sos.state.oh.us](http://www.sos.state.oh.us) or call 1-877-767-6446.

### Eligibility

You are qualified to register to vote in Ohio if you meet all the following requirements:

1. You are a citizen of the United States.
2. You will be at least 18 years old on or before the day of the general election.
3. You will be a resident of Ohio for at least 30 days immediately before the election in which you want to vote.
4. You are not incarcerated (in jail or in prison) for a felony conviction.
5. You have not been declared incompetent for voting purposes by a probate court.
6. You have not been permanently disenfranchised for violations of the election laws.

Use this form to register to vote or to update your current Ohio registration if you have changed your address or name.

**NOTICE:** This form must be received or postmarked by the 30th day before an election at which you intend to vote. You will be notified by your county board of elections of the location where you vote. If you do not receive a notice prior to Election Day, please contact your county board of elections.

Lines 1 and 2 below are required by law. You must answer both of the questions for your registration to be processed.

### Registering in Person

If you have a current valid Ohio driver's license, you must provide that number on line 10. If you do not have an Ohio driver's license, you must provide the last four digits of your Social Security number on line 10. If you have neither, please write "None."

### Registering by Mail

If you register by mail and do not provide either a current Ohio driver's license number or the last four digits of your Social Security number, please enclose with your application a copy of one of the following forms of identification that shows your name and current address:

Current valid photo identification card, military identification, or current (within one year) utility bill, bank statement, paycheck, government check or government document (except board of elections notifications) showing your name and current address.

### Your Signature

Your signature is required for your registration to be processed. In the box next to the arrow by line 14, please affix your signature or mark, taking care that it does not touch surrounding lines or type so it can be effectively used to identify you. If your signature is a mark, include the name and address of the person who witnessed the mark beneath the signature line. If by reason of disability you are unable to physically sign, you may follow specific procedures found in Ohio law (R.C. 3501.382) to appoint an attorney-in-fact who may sign this form on your behalf at your direction and in your presence.

Please see information on back of this form to learn how to obtain an absentee ballot.

FOLD HERE

1. Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No	2. Will you be at least 18 years of age on or before the next general election? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>If you answered NO to either of the questions, do not complete this form.</b>	

3. Last Name	First Name	Middle Name or Initial	Jr., II, etc.
4. House Number and Street (Enter new address if changed)	Apt. or Lot #	5. City or Post Office	6. ZIP Code
7. Additional Rural or Mailing Address (if necessary)		8. County where you live	
9. Birthdate (MO-DAY-YR) (required)	10. Ohio driver's license No. OR last 4 digits of Social Security No. (one form of ID required to be listed or provided)	11. Phone No. (voluntary)	
12. PREVIOUS ADDRESS IF UPDATING CURRENT REGISTRATION - Previous House Number and Street			
Previous City or Post Office	County	State	
13. CHANGE OF NAME ONLY Former Legal Name		Former Signature	

<b>FOR BOARD USE ONLY</b>
<b>SEC4010 (Rev. 07/08)</b>
City, Village, Twp
Ward
Precinct
School Dist
Cong. Dist.
Senate Dist.
House Dist.

I declare under penalty of election falsification I am a citizen of the United States, will have lived in this state for 30 days immediately preceding the next election, and will be at least 18 years of age at the time of the general election.

14. Your Signature →

Date      /      /       
MO DAY YR

### **HOW TO OBTAIN AN OHIO ABSENTEE BALLOT**

You are entitled to vote by absentee ballot in Ohio without providing a reason. Absentee ballot applications may be obtained from your county board of elections or from the Secretary of State at: [www.sos.state.oh.us](http://www.sos.state.oh.us) or by calling 1-877-767-6446.

### **OHIO VOTER IDENTIFICATION REQUIREMENTS**

R.C. 3503.19

Voters must bring identification to the polls in order to verify identity. Identification may include a current and valid photo identification, a military identification, or a copy of a current utility bill, bank statement, government check, paycheck, or other government document, other than a notice of an election or a voter registration notification sent by a board of elections, that shows the voter's name and current address. Voters who do not provide one of these documents will still be able to vote by providing the last four digits of the voter's Social Security number and by casting a provisional ballot. Voters who do not have any of the above forms of identification, including a Social Security number, will still be able to vote by signing an affirmation swearing to the voter's identity under penalty of election falsification and by casting a provisional ballot. For more information on voter identification requirements, please consult the Secretary of State's Web site at: [www.sos.state.oh.us](http://www.sos.state.oh.us) or call 1-877-767-6446.

**WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY  
OF A FELONY OF THE FIFTH DEGREE.**

If you are not registered to vote where you live now, would you like to apply to register to vote here today?  
 YES, I want to register to vote.  NO, I do not want to register to vote

If you do not check either box, you will be considered to have decided not to register to vote at this time. Applying to register or declining to register to vote will not affect the amount of assistance that you will be provided by this agency.

**PORTAGE COUNTY JOB AND FAMILY SERVICES  
PREVENTION, RETENTION AND CONTINGENCY PROGRAM APPLICATION (PRC)**

**\*\*TANF Summer Youth Employment Program\*\***

This application is to be used by youth, ages 14 -- 24, in families already receiving TANF cash assistance or in any TANF-eligible family. Must be a resident of Portage County.

Applicant Name \_\_\_\_\_ Current Address \_\_\_\_\_

Telephone Number(s) \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

List all members of your household (everyone that lives at the above address)

NAME	SOCIAL SECURITY #	DATE OF BIRTH	INCOME
Self			

Any person who is eighteen (18) years or older or emancipated with at least one minor child and/or pregnant and must also be a resident of Portage County can apply for PRC services. Pregnancy must be verified.

**Please answer the questions below:**

Is anyone in the household employed, if so, where? \_\_\_\_\_ Hours per week \_\_\_\_\_  
Employers Address \_\_\_\_\_ Phone \_\_\_\_\_  
Contact person \_\_\_\_\_

Are you currently under any type of sanction through Job and Family Services? \_\_\_\_\_ Yes \_\_\_\_\_ No

If you are eligible, the agency will limit assistance under this program to the actual documented amount of need, or the amount restricted for a specific service, or whichever is lower.

**WARNING:** By my signature below, I declare and state under penalty of perjury that the information on this application is true and complete to the best of my knowledge. I understand that the law provides penalty of fine and imprisonment (or both) for anyone convicted of accepting assistance he or she is not eligible for. Also, by my signature, I acknowledge that final approval of my PRC request is based on the established guidelines, availability of PRC funds, and is subject to the approval of the Director/Designee. I authorize the exchange of information between PCDJFS and the providers. I understand that all information contained in this application is confidential.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**ELIGIBILITY DETERMINATION**  
(For Agency Use Only)

INCOME		PUBLIC ASSISTANCE INCOME	
GROSS WAGES/30 DAYS PRIOR TO APPL.		OWF GRANT	
		UNEARNED INCOME	
TOTAL		TOTAL	
PRC/ FPG FOR HH SIZE OF \$ _____		APPROVED DATE _____ DENIAL DATE _____	
DATE OF APPLICATION _____		30 DAY BUDGET PERIOD FROM _____ TO _____	

CONTRACTED AGENCY: \_\_\_\_\_

APPROVED DATE \_\_\_\_\_ DENIAL DATE \_\_\_\_\_ REASON \_\_\_\_\_

ADDITIONAL INFORMATION NEEDED IS: \_\_\_\_\_

**FEDERAL POVERTY GUIDELINES EFFECTIVE 1/26/2012**

HOUSEHOLD SIZE OF:	2	\$2,522.00
	3	\$3,182.00
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	8	\$6,482.00

\_\_\_\_\_  
Staff Signature/Date