



Items that must be included on form to qualify to receive TEFAP product:

#### Section 1: Certification

1. **Signature of household member** – obtain the signature of a household member who is eligible to apply on behalf of the household
2. **Date** – enter the date of application

#### Section 2: Household Information

3. **Name of household member** — enter the name of the household member applying on behalf of the household
4. **Phone number** – enter phone number of household member **\*\*Not required\*\***
5. **Residential address** — Enter the household's residential address
6. **Total number of household members** — Enter the number of household members for whom USDA Foods are requested.
7. **Number of household by age group** – enter the number of all members based on age group **\*\*Not Required\*\***
8. **Name of proxy** (person given the authority to act on behalf of household) (optional) – Enter this information if it is applicable
9. **Address of proxy** – enter the address of the proxy and this may be used to verify ID of proxy

#### Section 3: Categorical Eligibility

1. **If the household receives other assistance** — if a household member(s) currently receives one or more of the specific types of assistance listed, mark the appropriate assistance type(s). If the household does not receive any of the assistance types listed, leave the assistance types blank. The specific assistance types are
  - Supplemental Nutrition Assistance Program (SNAP),
  - Temporary Assistance for Needy Families (TANF),
  - Supplemental Security Income (SSI),
  - National School Lunch Program (NSLP) (free or reduced-price meals), and
  - Medicaid.

#### Section 4: Income Eligibility

2. **Total gross income** — Optional if the household receives other assistance. Enter the total gross income of all household members, as stated by the household, and mark whether the income is received yearly, monthly, or weekly.

##### **Notes**

- *Farmers and self-employed persons may report net income (the amount after business expenses). This net income will be added to the gross income, if applicable, of other household members, to arrive at the total gross income for the household.*
- *Request but **do not require** an income statement from households that qualify because of other assistance (SNAP, TANF, SSI, NSLP (free or reduced-price meals), or Medicaid). **Be sure the applicant understands that this information is not required.***

Section 5: Household Crisis Eligibility \*\*Do not complete if is not eligible for Crisis, skip to section 6 if meets eligibility\*\*

1. **Is the household in need of temporary, crisis food assistance?** — Mark "Yes" for households that qualify based on unexpected and unavoidable expenses of a household crisis. In the "comments" section at the bottom of the page, document the cause of the household crisis. Mark "No" for households that do not qualify based on expenses of a household crisis.

Characteristics of a Household Crisis	Examples of Unexpected Costs of a Household Crisis <i>(The CE or distribution site may define and document other circumstances.)</i>
1. Unexpected 2. Temporary 3. Beyond the household's control	1. Necessary medical treatment of a household member 2. Burial expenses of a household member 3. Uncontrolled loss of employment 4. The repair or replacement, because of a household disaster <sup>1</sup> , of the household's home, home contents, or vehicle

2. Certification for **crisis** food need is six months. Some circumstances, however, require a certification period of seven to twelve months. TDA can approve, in writing, crisis food need for seven to twelve months.

**Examples**

- *A household may be certified up to one year, such as "Begins 3/2014, Ends 2/2015."*
- *A household with a crisis food need may be certified up to six months, such as "Begins 4/2014, Ends 9/2014."*

Section 6: Eligibility or Ineligibility

1. **Household is eligible**— For households that are eligible for USDA Foods, check the reason for eligibility.
2. **Certification period** — Enter the month and year that the certification period will begin and end. The certification period is up to 12 months.
3. **Household is ineligible** — Mark this item for households that are not eligible for USDA Foods.

Section 7: Signature and date of CE or site staff

10. **Date and signature** —The agency representative must sign and date the form.

Items not to be included on application:

1. Social Security number or ID number: these are not required documentation in order to qualify for eligibility.

If your agency offers more services and require to obtain more information from client, then the agency may use a separate form but cannot be denied for food services if do not provide.