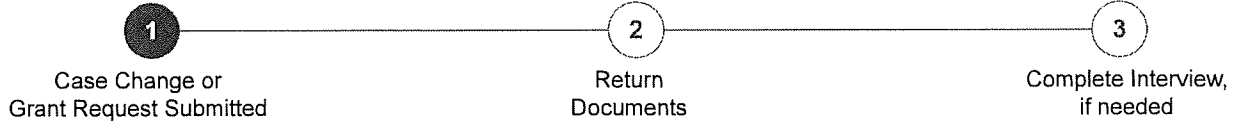




Human Resources Administration  
Case Change or Emergency Grant Request

Head of Case:  
Case Number:



**1 Success! Request Submitted on 5/21/2024 at 3:48 PM**

**Confirmation Number:**

You asked for help with the following:

- Add an adult (18 and over)
- Add a child

We sent you a confirmation email, if you gave an email address.

**2 You're not done yet! You must return the documents below.**

Your eligibility for assistance to meet an immediate or emergency need cannot be determined until you have provided the requested documentation.

**Missing some documents? Have questions? Skip to Step 3 and a worker will help.**

| Proof Of              | For | Suggested Documents  |
|-----------------------|-----|--|
| Identity              |     | Photo I.D. or Driver's License   |
|                       |     | U.S. passport  |
|                       |     | Birth Certificate  |
| Relationship          |     | Birth Certificate (long form)  |
|                       |     | Adoption papers/records  |
|                       |     | Court records  |
| Household Composition |     | A completed and signed W-147, "Letter to Landlord/Management Agent - Request for Residence Verification," signed by your landlord. |
|                       |     | School records   |

**Proof Of For Suggested Documents**

|                   |   |
|-------------------|---|
|                   | Statement from Community Organization   |
| Age               | Birth or baptismal certificate<br>Identity document with date of birth  |
| Non-Citizen       | Any document from the US Citizenship and Immigration Services (USCIS) or Department of Homeland Security (DHS) related to immigration<br>Legal Permanent Resident Card (I-551)<br>Employment Authorization Card (I-766) |
| School Attendance | Current report card<br>School records or letter   |

Please submit the unchecked documents as soon as you can get them. For more information see our document guide on the FAQ screen. We may ask for more documents later.

**Already have some of these documents with you? UPLOAD them now.** Here's how.



**Download** the free Access HRA Mobile App  
**Upload** your documents.

Other ways to return documents can be found [here](#).



3

**Submit your documents then we will call you to complete an interview by 5/28/2024.**

Based on the information you provided, you might be asked to appear for an Office of Child Support Services appointment.

If you need childcare for a child under 13 years of age for work or education activities, you may be eligible for childcare assistance. [Please see related forms here](#) or talk to a childcare specialist at your local center.

Please make sure that Melinkoss Palomino, Deyner Palomino, Nicolle Fuentes attends this interview.

Free language services are available.



Complete the 3 steps above or you may not get this benefit.

Need help completing these steps or understanding the questions on this application? Call 311 and ask about a partner organization that can help.

You will receive a written notice of the decision on your request by mail, and an electronic notice will be in the E-Notices section of ACCESS HRA.



## Emergency Information

|  |                         |
|--|-------------------------|
| Is this request for assistance an emergency? | Reason for the request: |
|  |                         |



## Contact Information

|              |                   |                 |              |
|--------------|-------------------|-----------------|--------------|
| Housing Type | Residence Address | Mailing Address | Phone Number |
|              |                   |                 |              |

### GPO Address

|             |
|-------------|
| GPO Address |
|             |



## Adding a household member

### Household Member

| First Name | Middle Initial | Last Name | Sex | Date of Birth | SSN |
|------------|----------------|-----------|-----|---------------|-----|
|            |                |           |     |               |     |
|            |                |           |     |               |     |

### Gender Identity

| Household Member | Woman/Girl/<br>Female | Man/Boy/Male | Non-binary or<br>Gender Non-<br>conforming | Transgender | Cisgender<br>(Not<br>Transgender) | Intersex | Prefer not to<br>say | Another<br>Option not<br>listed |
|------------------|-----------------------|--------------|--|-------------|-----------------------------------|----------|----------------------|---------------------------------|
|                  |                       |              |  |             |                                   |          |                      |                                 |
|                  |                       |              |  |             |                                   |          |                      |                                 |

### Household Member Information

| Household Member | Citizenship /<br>Immigration status? | Veteran? | Marital Status? | Parents Married at<br>Birth? | Pregnant? |
|------------------|--------------------------------------|----------|-----------------|------------------------------|-----------|
|                  |                                      |          |                 |                              |           |

| Household Member | Citizenship / Immigration status? | Veteran? | Marital Status? | Parents Married at Birth? | Pregnant? |
|------------------|-----------------------------------|----------|-----------------|---------------------------|-----------|
|                  |                                   |          |                 |                           |           |
|                  |                                   |          |                 |                           |           |

Household

| Household Member | Relationship | Buy and Prepare Food? |
|------------------|--------------|-----------------------|
|                  |              |                       |
|                  |              |                       |

Ethnicity

| Household Member | Native American/ Alaskan Native | Native Hawaiian/ Pacific Islander | Asian? | White? | Black/African American | Hispanic/ Latino? |
|------------------|---------------------------------|-----------------------------------|--------|--------|------------------------|-------------------|
|                  |                                 |                                   |        |        |                        |                   |
|                  |                                 |                                   |        |        |                        |                   |

Parent Not in Household Information

| Household Member | Name | SSN | ITIN | Date of Birth | Deceased? | Incarcerated? |
|------------------|------|-----|------|---------------|-----------|---------------|
|                  |      |     |      |               |           |               |

Parent Not in Household Address

| Household Member | Address | Second Parent Not in Household? |
|------------------|---------|---------------------------------|
|                  |         |                                 |

Parent Not in Household – Cooperate in pursuing child support

| Household Member | Are you able to cooperate in pursuing child support? | Second Parent Not in Household? |
|------------------|--|---------------------------------|
|                  |  |                                 |

Health Information

| Household Member | Blind/Visually Impaired | Disabled/Unable to Work | Drug/Alcohol Treatment? | Hours/Week |
|------------------|-------------------------|-------------------------|-------------------------|------------|
|                  |                         |                         |                         |            |
|                  |                         |                         |                         |            |

School Information

| Household Member | Graduated High School? | Highest Level Completed | In School? | School Type | DOE ID |
|------------------|------------------------|-------------------------|------------|-------------|--------|
|                  |                        |                         |            |             |        |
|                  |                        |                         |            |             |        |

Current Employment Income

No information entered.

### Current Self-Employment Income

No information entered.

### Recent Employment Income - Job Information

| Household Member | Job Type | End Date | Hours/Week |
|------------------|----------|----------|------------|
|                  |          |          |            |

### Recent Employment Income - Payment Information

| Household Member | Job Type | Payment Frequency | Paycheck 1 Amount | Paycheck 2 Amount | Paycheck 3 Amount | Paycheck 4 Amount |
|------------------|----------|-------------------|-------------------|-------------------|-------------------|-------------------|
|                  |          |                   |                   |                   |                   |                   |

### Recent Employment Income - Strike Information

| Household Member | Job Type | Participating in a strike? | When did they go on strike? | Strike Reason | Monthly Income before Strike |
|------------------|----------|----------------------------|-----------------------------|---------------|------------------------------|
|                  |          |                            |                             |               |                              |

### Social Security and Supplemental Security Income

No information entered.

### Unemployment Income

No information entered.

### Child Support Income

No information entered.

### Money from Another Person

No information entered.

### Other Income Detail

No information entered.

### Furniture Replacement

| Need furniture? | Furniture Reason | Which rooms need furniture? |
|-----------------|------------------|-----------------------------|
|                 |                  |                             |

#### Bedroom

| Number of single beds needed | Number of double beds needed |
|------------------------------|------------------------------|
|                              |                              |

#### Kitchen

| Kitchen items needed |
|----------------------|
|                      |

### Essential Household Items

| Household Items |
|-----------------|
|                 |

## Important Information about Adding a Household Member (Adult or Child)

---

I understand:

- The following person(s) may be added to my Cash Assistance case:
  - Newborn
  - Child entered home (e.g. adoption)
  - Child under 18 years of age whose immigrant status has changed since my last application/recertification
  - Spouse/Adult living with me who has not previously applied. This person must complete an application to receive cash assistance
    - Spouse who previously applied and was denied because of immigration status, and his/her status has changed. This person does not need to complete another application/recertification.
  - Myself/Adult payee to the case
- If a newborn, or a child or adult has recently moved or was added into my household:
  - I may be eligible for additional Cash Assistance for food, rent, and other needs.
  - I may also be eligible for additional Supplemental Nutrition Assistance Program (SNAP) benefits.
- If reporting the birth of a child, the following documentation are needed:
  - Birth certificate
  - Social security card
  - Verification that the child was discharged to the mother or guardian

### Furniture Allowance

- If eligible for emergency assistance, I may be granted a furniture allowance for the purchase of necessary and essential furniture required for my home.
  - I must meet any one of the following criteria:
    - I am moving from a hotel, motel, homeless shelter, residential program for victims of domestic violence, or other temporary accommodations to permanent housing that is unfurnished, and suitable furnished accommodations are not available.
    - I was discharged from an institution, and am determined to be capable of maintaining an apartment in the community, and suitable furnished accommodations are not available.
    - I was discharged from an institution and wish to rejoin my family, and need additional furniture to provide adequate shelter for me.
    - A child is returned to his/her parents, who are in need of additional furniture to provide adequate shelter for him/her.
    - It is essential that an individual or family be re-housed (moving from one living situation to another) in order to safeguard his/her or their health, safety, and well-being. In this instance, the individual/family's living situation is adversely affecting his/her or their physical and mental health and thus the need for the move. The emergency in this situation must also be such that the client cannot move with their current furnishing.
- A furniture allowance can also be granted for me to replace existing furniture, even if there is no change in living accommodations. In this case, the replacement of the furniture is needed for my health and safety.
- A furniture allowance can be granted for health and safety reason when an individual has moved from one residence into unfurnished accommodations, and suitable furnished accommodations are not available.

HRA will notify me of any action taken based on this request in writing.

HRA will not allow a client to submit another request of the same type until the active request is processed.