

# TANF 청소년 서비스 신청서

본 양식에서 요청하는 정보는 연방 빈곤 가정 임시지원(TANF) 기금을 귀하를 위한 서비스 제공에 사용할 수 있는지의 여부를 결정하는 데 필요합니다. 본 신청서 양식은 21 세 이하의 서비스 신청자가 사용할 수 있습니다.

## 섹션 1

### A. 청소년 신청자에 대한 정보

1. 신청자 성명: \_\_\_\_\_

자택 주소: \_\_\_\_\_

(번지) (아파트 호수)

(시)

(주)

(우편번호)

사회보장번호: \_\_\_\_\_ 생년월일: \_\_\_\_\_

(월, 일, 년)

전화번호: \_\_\_\_\_

## 섹션 2 시민/비시민 지위

### A. 귀하는 미국 시민입니까?

예 '예'인 경우 섹션 3으로 가십시오.

아니오. '아니오'인 경우 항목 B를 작성하십시오.

B. 귀하(청소년 신청자)가 미국 시민이 아닌 경우 5-6 페이지의 "이민 지위 목록"을 보시고 귀하에게 어떤 이민 지위가 적용되는지 알려주십시오. 목록에서 이민 지위 번호를 입력하고 아래 정보를 작성하십시오.

해당되는 이민 지위(# 1 - 15): \_\_\_\_\_

INS 양식 번호: \_\_\_\_\_

Alien 번호: \_\_\_\_\_

미국 입국 날짜: \_\_\_\_\_

## 섹션 3 가족의 소득

### A. 귀하(청소년 신청자)는 현재 이 프로그램 중 하나 이상에서 지원금을 받고 있습니까?

예, 어느 프로그램인지 확인한 후 섹션 4로 가십시오.

가족 지원 안전망	MEDICAID	영양보충지원프로그램(SNAP)	HEAP	SSI

아니오, 2 페이지의 항목 B를 작성하십시오.

**B. 현재 위에 표시된 프로그램 중 하나를 수령하고 있지 않을 경우 귀 가족의 소득을 알려주십시오.**

함께 동거하는 가족의 총소득(세전 및 공제 전 소득)을 포함하십시오. 가족에는 어머니, 아버지, 계모, 계부, 18세 미만(또는 18이고 중등학교에 재학중인)의 형제 또는 자매(반 형제 포함) 및 자매의 부모가 포함됩니다. 자녀가 있는 경우 자녀와 자녀의 형제 또는 자매, 자녀의 부모도 포함시켜야 합니다. 이들과 동거하지 않는다면 포함시켜서는 안 됩니다. 조부모, 삼촌 또는 고모와 같은 기타 가족도 포함시켜서는 안 됩니다. 기혼자인 경우 배우자를 포함시켜야 하지만 부모나 형제자매를 포함시킬 필요는 없습니다.

임금, 사회보장 지원금, 공적부조 지원금, 아동 지원금, 이혼수당 등과 가족의 기타 소득을 포함한 모든 총소득원을 표시하십시오. 귀하 또는 18세 미만(또는 18이고 중등학교에 재학중인)의 가족이 수령하는 소득(임금)을 포함시킬 필요는 없지만 블로소득은 반드시 포함시켜야 합니다.

	성명	소득원: 임금, 사회보장 등	금액	수령함 (하나를 표시하십시오)		
				년간	월간	주간
1.						
2.						
3.						
4.						
5.						
6.						

**섹션 4 신청자 통지 및 서명**

본 신청서에 서명하는 사람은 내역 모두를 증빙하라는 요구를 받을 수 있습니다. 그렇게 요구할 경우 귀하의 내역을 증빙하는 방법을 알려드릴 것입니다.

사회보장번호를 요구하는 이유는 TANF 서비스 또는 지원을 신청하거나 수령하는 사람이 본인의 사회보장번호를 알려주어야 하고, 사회보장번호가 연방법(사회보장법 섹션 409(a)(4))과 연방규정(45 CFR 264.10)에 따라 요구되기 때문입니다. 사회보장번호는 다른 프로그램들과의 컴퓨터 매치를 통해 귀하가 이 프로그램(예, SNAP)을 수령하고 있음을 확인하고, 컴퓨터매치를 통해 신청서에 표시된 다른 정보를 확인하며, 귀하의 외국인 지위 상태를 확인하는 용도로 사용할 수 있습니다.

귀하의 TANF 서비스 수령 자격과 관련하여 내린 어떤 결정에 귀하가 동의하지 않는 경우 귀하는 첫 번째 결정을 내린 사람보다 높은 위치에 있는 사람에게 귀하의 인증을 확인 받을 수 있습니다.

본인은 이 양식에 서명함으로써 위증했을 경우 처벌 받는 것을 전제로 위에 작성된 모든 사항은 내가 알고 있는 한도에서는 사실이며, 제공된 정보를 확인하기 위한 모든 활동에 기꺼이 협력할 것임을 맹세합니다.

서명: \_\_\_\_\_ 날짜: \_\_\_\_\_

신청자와의 관계: \_\_\_\_\_

신청자가 부모와 동거하는 경우 부모 또는 다른 성인 친인척 관리인은 신청이 완료될 수 있도록 본 양식에 서명해야 합니다. 사회복지부 장관 또는 장관의 지명을 받은 사람은 위탁 중인 아동을 대신해 서명해야 합니다.

**SECTION FIVE TANF Youth Services Application Review Form**

CERTIFICATION ITEM	Yes	No																								
1. Is the applicant a New York State resident?																										
2. Is the applicant under 21 years of age?																										
3. Is the applicant for services either a United States citizen or a qualified non-citizen? Note: Documentation of non-citizen status is required.																										
<p>4. Is the combined current gross income of the applicant's family members equal to or less than 200% of the federal poverty level? [See additional instruction below regarding options time period of income considered.]</p> <p>___ Income test is met based on applicant receiving Family Assistance, Safety Net Assistance, Medicaid, SNAP, HEAP or SSI?</p> <p style="text-align: center;"><b>OR</b></p> <p>___ Income test is met based on a calculation of combined gross income for applicant's family size.</p> <p style="text-align: center;">Worksheet - Calculation of Current Gross Income (convert all income to annual income)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #d3d3d3;"> <th style="width: 15%;">Source</th> <th style="width: 20%; text-align: center;"><u>Yearly</u></th> <th style="width: 20%; text-align: center;">Monthly (x12=yearly)</th> <th style="width: 20%; text-align: center;">Weekly (x 52=yearly) (x4.333=monthly)</th> </tr> </thead> <tbody> <tr><td>1.</td><td></td><td></td><td></td></tr> <tr><td>2.</td><td></td><td></td><td></td></tr> <tr><td>3.</td><td></td><td></td><td></td></tr> <tr><td>4.</td><td></td><td></td><td></td></tr> <tr><td>5.</td><td></td><td></td><td></td></tr> </tbody> </table> <p>a. Total gross income is: \$ _____ per year.</p> <p>b. Subtract child support payments made \$ _____ per year.</p> <p>c. Net gross income for 200% test is: \$ _____ per year. (Time period must be the same for a, b, and c)</p> <p>d. Total family size is _____.</p> <p><b>Compare combined gross income (item c) to the 200% of poverty standard for the individual's family size (item d) to determine if income is equal to or less than the 200% standard. Include only countable income.</b></p>	Source	<u>Yearly</u>	Monthly (x12=yearly)	Weekly (x 52=yearly) (x4.333=monthly)	1.				2.				3.				4.				5.					
Source	<u>Yearly</u>	Monthly (x12=yearly)	Weekly (x 52=yearly) (x4.333=monthly)																							
1.																										
2.																										
3.																										
4.																										
5.																										
5. If the applicant lives with his or her parents, did the parent or caretaker relative sign the certification form? Please note: The DSS Commissioner or his or her designee must sign for a child in foster care.																										

**Current Income** – Current income is income that has been or is expected to be received in the calendar month of the application for TANF Services, and is expected to continue beyond this month.

**or**

If your income in the calendar month of application is higher than your regular monthly income, you may provide information based on your annual income (from the prior 12 months). This annual income must be adjusted for any change in income known or expected to occur.

**Gross Income includes:** Wages, salary and tips from work; self-employment income (after business expenses); Social Security benefits; public assistance; unemployment compensation; worker's compensation; Supplemental Security Income (SSI); child supports payments received; alimony received; interest payments; other recurring income that is not excluded below.

**Excluded Income:** Earned income of a minor child; adoption/foster care payments; one-time loans, gifts, lump sum payments or other non-recurring income; child care subsidy payments.

**Certification Decision**

- The applicant is certified for TANF Services.** All Items on page 3, must be answered Yes.
- The applicant is not certified to receive TANF services for the following reason(s):
  - The applicant is not a resident of New York State.
  - The applicant is not under 21 years of age.
  - The applicant is not a U.S. citizen or a qualified non-citizen.
  - The income of the family members is above 200% of poverty
  - Other (This can be any number of reasons, for example, the person refused to sign the form, reveal his/her Social Security number.) Specify reason below.

\_\_\_\_\_

\_\_\_\_\_

**Signature of reviewer:** \_\_\_\_\_ **Date** \_\_\_\_\_

Agency/Organization: \_\_\_\_\_

Second Level Review

- ◆ Complete this section only if the person certifying requests the review.
- ◆ The review must be done by someone at a higher level than the person originally doing the review.

The results of the second level review were:

- Agreed with the original decision.
- Disagreed with the original decision for the following reason(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The result of the second level review is that:

- The applicant for services is certified to receive TANF Services.
- The applicant for services is not certified to receive TANF Services.

**Signature of reviewer:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Agency/Organization: \_\_\_\_\_

STATUS	Relevant Date for Eligibility	Common Documentation
1. Refugees	Entry	<p><b>I-94:</b> stamped "Admitted under Section 207 of the INA," "Refugee," "RE1, RE2, RE3, RE4" or  <b>I-551:</b> stamped "R8-6, RE5, RE6, RE7, RE8 or RE9" or  <b>I-571:</b> Refugee Travel Document or  <b>I-688B:</b> Employment Authorization Document annotated with "8 C.F.R. § 274a.12(a) (3)" or  <b>I-766:</b> Employment Authorization Document annotated "a3"</p>
2. Cuban/Haitian Entrants	Status Granted	<p><b>I-94:</b> stamped "Cuban/Haitian Entrant (status pending)," "Section 212(d) (5) of the INA," "Form I-589 filed," or "CU6," or CU7" or  <b>I-94</b> stamp showing parole under Section 212(d)(5) of INA or stamp showing parole in US on or after 10/10/80 and reasonable evidence that parolee has been a National (citizen) of Cuba or Haiti or  <b>I-551:</b> stamped "CU6, CU7, or CH6" or  Temporary <b>I-551</b> stamp in foreign passport. or  USCIS notice or letter indicating ongoing exclusion or deportation proceedings or  A document from USCIS indicating individual applied for asylum.</p>
3. Asylees	Status Granted	<p><b>I-94:</b> stamped "Granted asylum under Section 208 of the INA" or  <b>I-551:</b> Stamped "AS1,AS2, AS3, AS6, AS7, or AS8" or  <b>I-688B:</b> Employment Authorization Card annotated with "8 C.F.R. § 274a.12(a)(5)" or  <b>I-766:</b> Employment Authorization Document annotated "(a5)" or  Grant letter from USCIS Asylum Office or  Order of an immigration judge granting asylum.</p>
4. Amerasian Immigrants	Entry	<p><b>I-94:</b> stamped "AM1, AM2, AM3, AM6, AM7, or AM8." Derive date of entry from date of inspection on stamp; if date is missing, obtain from I-551 or from USCIS or  <b>I-551:</b> stamped "AM1, AM2, AM3, AM6, AM7, or AM8" or  Temporary <b>I-551</b> stamp in foreign passport or  <b>I-571:</b> Refugee Travel Document or  Vietnamese exit visa or passport stamped "AM1, AM2, or AM3"</p>
5. Deportation or Removal Withheld	Status Granted	<p><b>I-688B:</b> Employment Authorization Card annotated with "8 C.F.R. § 274a.12(a)(10)" or  <b>I-766:</b> Employment Authorization Document annotated "(a10)" or  Order from Immigration Judge showing the date deportation was withheld under Section 243(h) of the INA as in effect prior to April 1, 1997, or removal withheld under Section 241(b)(3) of INA</p>
6. Certain Hmong or Highland Laotian	Status Granted	<p><b>I-94:</b> stamped "Admitted under Section 207 of the INA," "Refugee," "RE1, RE2, RE3, or RE4" or  <b>INS I-551:</b> Stamped "RE5, RE6, RE7, RE8, or RE9" or  Has a signed affidavit sworn under penalty of law that s/he was a member of Hmong or Highland Laotian tribe between 8/5/64 and 5/7/75 or a verified spouse*, widow, widower or unmarried dependent of a tribal member and  Documents to show lawfully residing in the US  <b>Divorced spouses do not qualify</b></p>
7. Lawfully Admitted For Permanent Residence (LPR) without 40 Qualifying Quarters	Entered Before 8/22/96 Entered on/after 8/22/96 and has been in the U.S. for 5 years or more.	<p><b>I-551:</b> (Permanent Resident Card) or  Temporary <b>I-551</b> stamp in foreign passport or on <b>I-94</b>. or  <b>I-327</b> (Re-entry Permit) or  <b>I-181:</b> Memorandum of Creation of Lawful Permanent Residence with approval stamp</p>
8. Veteran, spouse, unmarried surviving spouse and unmarried dependent child of a U.S. veteran who fulfilled minimum active duty requirement (2 years)	Status Granted	<p>A Discharge Certificate (<b>Form DD-214</b>) that states "Honorable." A character of discharge "Under Honorable Conditions" is not an "Honorable Discharge" for these purposes. Narrative Reason for Separation block must not state that discharge was for reason of "alienage" or lack of U.S. citizenship</p>

STATUS	Relevant Date for Eligibility	Common Documentation
9. <b>Active Military: Active duty or a member of the Armed Forces on full-time duty in the Army, Navy, Air Force, Marine Corps or Coast Guard, spouse and children</b>	Status Granted	Military Identification Card (DD Form 2) (Active) that lists an expiration date of more than one year from the date of determination. If ID card is due to expire within one year from the date of determination, use a copy of current military orders.
10. <b>Conditional Entrant (status granted to refugees before 1980)</b>	Entry	<b>I-94</b> with stamp showing admitted under Section 203(a)(7) of INA <b>or</b> <b>I-688B</b> (Employment Authorization Card) annotated "274a.12(a)(3)" <b>or</b> <b>I-766</b> (Employment Authorization Document) annotated "(a1)" or "(a3)
11. <b>A US citizen's or LPR's battered spouse or child, or parent or child of such person, who obtains "Notice of Prima Facie Case from USCIS under the Violence Against Women Act (VAWA)</b>	Entered Before 8/22/96 Entered on/after 8/22/96 and has been in the U.S. for 5 years or more.	I-797 (Notice of Action) indicating prima facie eligibility of an I-360 self-petition under INA Section 204(a)(1)(A) (iii) or (iv); <b>or</b> INA Section 204(a)(1)(iii)(B) (i) or (iii)
12. <b>Victim of Human Trafficking</b>	Entry	Certification Document (for adults) or Eligibility Letter (for children) from the Office of Refugee Resettlement (ORR); Must call 1-866-401-5510 for verification <b>or</b> <b>I-94</b> Coded T1, T2, T3, T4 or T5 stating admission under Section 212(d)(5) of the INA if status granted for at least one year
13. <b>Parolee (for at least one year) (Non-citizens who have been allowed to come into the U.S. for humanitarian or public interest reasons)</b>	Lawfully Residing in U.S. on 8/22/96 Entered on/after 8/22/96 and has been in the U.S. for 5 years or more.	<b>I-94</b> with annotation "Paroled pursuant to Section 212(d)(5)" or "parole" or "PIP" with date of entry and date of expiration indicating one year <b>or</b> <b>I-688B</b> annotated "8 CFR Section 274a 12(a)(4) or 274(a) 12(c)(11)" <b>or</b> <b>I-766</b> annotated "C11" or A4, and <b>I-94</b> indicating admitted for at least one year
14. <b>North American Indian born in Canada</b>	NA	<b>I-551</b> : (Permanent Resident Card): stamped "S1-3", temporary <b>I-551</b> stamp in a Canadian passport <b>or</b> <b>I-94</b> : stamped "S1-3" <b>or</b> <b>Tribal document</b> certifying at least 50% American Indian blood, as required by Section 289 of the INA or documented member of a federally recognized tribe <b>and</b> School records, <b>or</b> A birth or baptismal certificate issued on a reservation, <b>or</b> Other satisfactory evidence of birth in Canada
15. <b>Member of federally recognized tribe born outside U.S.</b>	NA	Membership card or other tribal document demonstrating membership in a federally recognized Indian tribe under Section 4(e) of the Indian Self-Determination and Education Assistance Act