



Division of Family and
Children Services



Application for Benefits

Are you or any household member a migrant or seasonal farm worker?

☐ Yes

☒ No

Total Gross earned income that will be received for this month:

\$ 3,000

How much money do you and all household members have in cash or in the bank? \$ _____

What is your household's primary heating or cooling source? Mark all that apply

Electric ☒ Gas _____ Window or central air conditioner _____ Kerosene oil _____ Wood ☒

Have you received energy assistance in the last 12 months? Yes ☐ No ☐ If yes, amount received \$ _____

Josephine

K

Jones

First Name

Middle Initial

Last Name