



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:

\$ 2,300

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 \$ \_\_\_\_\_

Marco

First Name

D

Middle Initial

Garcia

Last Name