

**DECLARATION OF PERSONAL INCOME**

This form is to be used for:

- Zero income applicants and household members ages 18 and over, except for spouse and children who are full-time students
- Regular informal payments received (such as informal child support agreement)
- Other self-declared income or benefits

Name: \_\_\_\_\_ Relationship to Applicant: \_\_\_\_\_

Applicant name (if different): \_\_\_\_\_

**SECTION 1: Other sources of income**

Do you receive any of the following? (Please check all that apply)

- Child support     Alimony     Pension     Other: \_\_\_\_\_  
 Worker's Comp     Veterans Benefits     Social Security     TANF

**SECTION 2: Income**

- If you have NO income, how long have you had zero income? \_\_\_\_\_
- What is the source of your informal undeclared income? \_\_\_\_\_
- How much money have you received in the last 30 days? \_\_\_\_\_

**SECTION 3: Rent, Food and Utilities**

- Is your rent subsidized?  Yes  No How much do you pay for rent/house payment? \_\_\_\_\_
- How do you pay for your rent? \_\_\_\_\_
- If someone is paying your rent, how many months have they been helping you? \_\_\_\_\_
- How do you pay for food? \_\_\_\_\_
- How do you pay your utilities? \_\_\_\_\_

*I certify that the information stated is true and accurate by signing this form. I am under penalty of criminal prosecution if false information results in assistance for which I am not eligible.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Clients are provided services regardless of race, color, national origins, gender, religion, age, disability, political beliefs, sexual orientation, and marital or family status.