

Public Benefits Questionnaire

The government requires information on whether you have ever received and/or been approved to receive public assistance benefits, even if you have not received them. You must respond to each of the questions below.

Have you ever received or been approved to receive any of the following public benefits? (Check all that apply)

____ YES, I have received or have been certified to receive the following public benefits (Check all that apply).

____ NO, I have not received nor am I currently certified to receive the following public benefits. If you check "NO", please skip to number 6 on the next page to sign and date.

____ Any Federal, State, local or tribal cash assistance for income maintenance

____ Supplemental Security Income (SSI)

____ Temporary Assistance for Needy Families (TANF)

____ General Assistance (GA)

____ Supplemental Nutrition Assistance Program (SNAP, formerly called "Food Stamps")

____ Section 8 Housing Assistance under the Housing Choice Voucher Program

____ Section 8 Project-Based Rental Assistance (including Moderate Rehabilitation)

____ Public Housing under the Housing Act of 1937, 42 U.S.C. 1437 et seq.

____ Federally Funded Medicaid

Signature _____

Date (mm/dd/yyyy) _____