

FINANCIAL AID QUALIFICATION

Desk Aid

Applicant Name: _____ Appl. Date: _____ SSN: _____

Eligibility Criteria	Youth	Adult	Dislocated Worker	Child Care
I. General Eligibility				
U.S. Citizen or eligible to work in the U.S.				
Age (Youth 14-21) (Adult 18+) (child's age < 13, or < 19 with a disability)				
Selective Service (males born on or after Jan. 1, 1960)				

II. Economic Eligibility (identify one, if applicable)				
A. TANF recipient or family member thereof (or applied for TANF-child care only)				
B. Family income below levels for family size				
Determine Family Size				
C. FSE&T (receives or was certified eligible to receive in last 6 months, WIA only)				
D. Homeless				
E. Publicly supported foster child				
F. Individual with a disability (Income < for family of 1)				

III. Youth Challenges (identify one, if applicable)				
A. Deficient in basic literacy skills				
B. Pregnant or Parenting Youth				
C. School dropout				
D. Offender				
E. Homeless or runaway youth				
F. Needs additional help to: complete Ed. program or secure and hold employment. Must meet one of following board definitions:				
1. Age 14-15, needs help to secure and hold employment when not in school				
2. Behind grade level				
3. Habitually truant				
4. Dependent member of single parent family				
5. Failed all or part of TAKS test				
6. Lacks significant work history				
7. Determined by a pub/priv agency to need help to complete ed or get job				

Youth 5% Window (For Youth over income guidelines)				
A. Basic skills deficient				
B. Behind grade level				
C. School dropout				
D. Offender				
E. Individual with a disability				
F. Homeless or runaway youth				
G. Dependent member of single parent family				
H. Pregnant or parenting				

Dislocated Worker Categories (identify one, if applicable)				
A. UI Profiled				
B. Terminated or laid off & UI Elig. or exhausted, & unlikely to return				
C. TAA				
D. Permanent closure or substantial layoff				
E. Previous self-employed: due to: Local Eco. or Natural disaster				
F. Planned closure or public notice				
G. Displaced Homemaker				

Child Care				
A. Residence with in the 13 county region				
B. Working or in training 30+ hours per week				
C. Proof of effort to collect child support				
D. Proof the child receiving care is a U.S. citizen or legal immigrant				