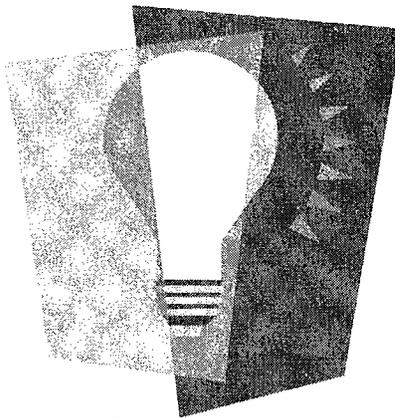


**Arizona Department of Economic Security  
DIVISION OF AGING AND ADULT SERVICES  
(DAAS)**

**LOW INCOME HOME ENERGY  
ASSISTANCE PROGRAM  
(LIHEAP)**



**POLICY MANUAL  
SFY 2011**

July 1, 2010 – June 30, 2011  
(REVISED EFFECTIVE 07/01/2010)

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## 100 PURPOSE AND PRINCIPLES

### 101 Purpose

The Low Income Home Energy Assistance Program (LIHEAP) is authorized by Title XXVI of the Omnibus Budget Reconciliation Act of 1981 (OBRA), Public Law 97-35, as amended. The Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services administers LIHEAP at the federal level.

The Human Services Amendments of 1994 (Public Law 103-353) reauthorized LIHEAP through FY1999. In 2004 the Senate passed the Poverty Prevention and Reduction Act, reauthorizing LIHEAP through 2010. The House is also working toward reauthorization. As part of the original reauthorization, Congress amended the purpose of LIHEAP to clarify that LIHEAP is **"to assist low income households, particularly those with the lowest income, that pay a high proportion of household income for home energy, primarily in meeting their immediate home energy needs."**

The LIHEAP program provides for heating/cooling bill assistance in the form of a LIHEAP and/or Supplemental benefit. A LIHEAP benefit payment is made to the energy vendor on behalf of eligible households that meet income criteria and accumulate the required number of points. LIHEAP benefit payment amounts are determined based on: household income, energy burden and energy need. A LIHEAP benefit does not require a shut-off or eviction notice.

A supplemental benefit shall only be paid if a maximum LIHEAP benefit has been or is being made. To provide a LIHEAP supplemental benefit the household must be in a crisis situation. (Crisis definition on page 14)

The LIHEAP program is provided on a statewide basis to eligible households. Applications are taken by Community Action Program (CAP) agencies that the Department of Economic Security, Division of Aging and Adult Services, Community Action Program (CAP) Unit has written contracts. CAP agencies are responsible for gathering documentation to verify eligibility.

NOTE: The policies and procedures in this section relate only to services/benefits funded by LIHEAP. Utility Assistance is also provided under other programs that have their own policies and procedures.

### 102 Principles

LIHEAP encourages contract agencies to partner and collaborate with other community-based organizations to provide services that meet the needs of low-income households.

### 103 Format

The manual is divided into major policy sections and subsections.

### 104 Changes in Policy or Procedures

- A. Each contract agency will be responsible for ensuring LIHEAP Policy Manuals are issued to individual staff members and are maintained and updated.
- B. New and/or replacement pages for the LIHEAP Manual will be issued in the form of numbered Manual Transmittal Letters by DES/DAAS. The transmittal letter

will contain instructions for updating the manual as well as a summary of the changes and the effective dates.

105

**Policy Questions and Clarifications**

All contract agency staff requesting clarification regarding procedural detail or policy interpretation will be elevated in the following order to:

- A. The contracted agencies internal process;
- B. The individuals designated at DES/DAAS are listed below and all requests must be submitted in writing via FAX or Email to:

**DES/DAAS – Community Action Programs Unit**

**ATTN: POLICY DEVELOPMENT**

**FAX: 602-364-1756**

Or

EMAILED TO [etapia@azdes.gov](mailto:etapia@azdes.gov) and [grobles@azdes.gov](mailto:grobles@azdes.gov)

**200 APPLICATION PROCESS**

The application process for LIHEAP includes a face-to-face interview with Contract Agency Staff, verification of eligibility information and completion and filing of an application. Also, Section 2604 of the Federal Regulations states that agencies must provide the following:

The program for which funds are reserved by this subsection shall be administered by public or non-profit entities which have experience in administering energy crisis programs under the Low-Income Home Energy Assistance Act of 1980 or under this Act, experience in assisting low-income individuals in the area to be served, the capacity to undertake a timely and effective energy crisis intervention program, and the ability to carry out the program in local communities. The program for which funds are reserved under this subsection shall:

- (1) not later than 48 hours after a household applies for energy crisis benefits, provide some form of assistance that will resolve the energy crisis if such household is eligible to receive such benefits;**
- (2) not later than 18 hours after a household applies for crisis benefits, provide some form of assistance that will resolve the energy crisis if such household is eligible to receive such benefits and is in a life-threatening situation; and**
- (3) require each entity that administers such program**
  - (A) To accept applications for energy crisis benefits at sites that are geographically accessible to all households in the area to be served by such entity; and**
  - (B) to provide to low-income individuals who are physically infirm the means -**
    - (i) to submit applications for energy crisis benefits without leaving their residences; or**
    - (ii) to travel to the sites at which such applications are accepted by such entity.**

## EN005 Application

.01

### Application Forms

The application for LIHEAP is the EN005 pages 1, 2 and 3 (**ATTACHMENT 7**) In addition, a **LIHEAP eligibility worksheet must be completed to determine payment amount, (ATTACHMENT 3).**

The Agency must provide the applicant with a copy of the application. Another copy must be retained in the case file at the community action agency. **Each Agency is responsible for any additional copies they deem necessary for their own records.**

Application forms are provided to contract agencies by DES/DAAS. Applications may be obtained by completing the DAAS Application Order Form, (**ATTACHMENT 6**). This should be mailed or faxed to DES/DAAS to the following:

**DES/DAAS  
Application Order Form  
Site Code 086Z  
P.O. Box 6123  
Phoenix, AZ 85005-6123  
FAX: 602-364-1756**

.02

### Right to Request Financial Assistance

All persons have the right to request financial assistance by following the procedures established by the state and the local agency that provides the services for the area in which they live.

.03

### Completing the EN005 Application

Contract agencies must ensure the EN005 pages 1, 2 and 3 is clear and legible and that no information is illegible from "white out". The EN005 must contain the following information.

- A. Name, address, and if available, ten digit telephone number.
- B. Personal information, including:
  - 1. Social security number;
  - 2. Gender;
  - 3. Date of birth;
  - 4. Citizenship status;
  - 5. Disability;
  - 6. Health Insurance;
- C. Gross monthly countable income;
- D. Energy Burden;
- E. Employment history for all household members ages 18 and older (16 if not a full time student) for 30 days prior to and including date of application;
- F. Payment information must include:
  - 1. Vendor name
  - 2. Billing name
  - 3. If Vendor is a landlord, must complete landlord section page 3 and include their FEI number.
  - 4. Service Code

- 5. Budget code
- 6. Payment amount
- G. Signature of the applicant on the application must match the applicant's name throughout the case file;
- H. Case Manager's signature must be legible and match the worker identification number on page one of the application.

## 202 The Standard Household Unit

A Standard Household Unit consists of every household member who must be included in the eligibility determination for assistance. If the applicant or a household member is pregnant and in the third trimester of the pregnancy, the fetus is considered an eligible child and shall be listed as an individual in the household.

A. **Boarders** are one or more persons living in the same house **paying rent to the owner of the home who also lives in the house** or one who lives and pays rent in a commercial boarding house. Income of the owner of the home or other boarders is not counted. Boarders cannot be related by blood or law to the owner of the home.

1. Susan and Jane live in the house that Susan owns. There is no blood or law relationship. Susan is renting a room to Jane and her two children. Jane and her two children are the boarders. Susan will not be included as a household member on the application.
2. Jim is a boarder at a halfway house. Jim is not eligible because a halfway house is not considered permanent housing.
3. Jane and her new baby live with her Aunt Betty. Jane no longer receives child support and cannot pay her Aunt any rent money for the month of June. Because they are related, Jane is considered a roommate **not** a boarder. All family members in the household are included on the application and all income is counted.

**Note:** An agency may contact DES to request approval for exceptions. Example: If Aunt Betty provides receipts documenting Jane's rental payment history or a contractual agreement indicating Jane's legal obligation to pay a specified rent amount, then Jane could be considered a boarder.

B. **Roommates** are one or more persons living in the same house **paying rent to the landlord outside of the home**. This should not be confused with boarders as all income for roommates is counted.

Linda and Donna are roommates. Donna pays rent to Linda, who has a rental agreement with a landlord living outside the home. They will be considered roommates, and both Linda and Donna will be included on the application.

2. Martin and Mary own and reside in their own home. Nephew Sam and his family live with them. They will be considered roommates due to the blood relationship between Mary and Sam. All household members will be included on the application.

## 203 Verification and Documentation

Verification is the use of documents, systems information or contacts with third parties to establish the accuracy of information provided by the applicant during the interview and indicated on the application form.

- A. The applicant has the primary responsibility for providing all required verification.
- B. In situations where it is difficult for the applicant to obtain verification needed to complete the eligibility determination, the Contract Agency will offer assistance in obtaining the verification.

.02

### **Documentation**

The case file must contain the method by which eligibility criteria was verified, (Hard Copy, Collateral Contact, Visual Verification or Client Statement). Documentation must support eligibility, ineligibility, and the services to be provided and must be in sufficient detail to permit a reviewer to analyze the accuracy of the eligibility determination.

- 1. Documentation can be recorded with a hard copy (HC), collateral contact (CC), visual verification (VV), or client statement (CS).

➤ Visual verification may only be used when providing a home visit.

- 2. Documentation is written by the worker to support or clarify any information on the application.
- 3. A declaratory statement may be used, but only after all other resources have been exhausted. To be considered valid this statement must include:
  - a. Date the statement was made
  - b. Client's signature
  - c. All information required for verification and documentation

.03

### **Mandatory Verification**

The following eligibility criteria must be verified:

Identity of the Applicant; any document that establishes the applicant's identity will be accepted. Documents include, but are not limited to:

- Driver's license;
- Work or school ID;
- ID card from health benefits or another assistance or social service program;
- Voter registration card;
- Wage stubs;
- Birth certificate;
- Citizenship or Non Citizen immigration status
- Family census card; or
- Other reasonable written sources

When documents are not available; a collateral contact may be used. If all other resources have been exhausted a client statement may be taken, but **NOT** for verifying Citizenship or Legal Resident Status.

**Citizenship or Legal Permanent Resident (LPR) Status** for the applicant. (See Exhibit 1 "Instructions for verifying Citizenship and Non-Citizen Legal Permanent Resident (LPR) Status").

**Residential Address**; applicant may provide, lease agreement, utility bills (in clients name), etc.

**Gross Non-Exempt Income** of all household members; income may not exceed 200% of the Federal Poverty Guidelines (see page 16).

**Social Security Numbers** for Applicant and all household members (if a household member does not have a Social Security Number, Case Manager may assign a pseudo number following agency procedures).

**204. APPLICATION SUBMITTAL**

Applications are not submitted to DES-DAAS. Each agency is responsible for processing applications in order to track the eligibility of the applicant and to pay the vendor.

**300 NON-FINANCIAL ELIGIBILITY**

LIHEAP benefits are available to singles and/or families with children including those receiving cash assistance.

**301. An Eligible Applicant**

1. Must be vulnerable to the rising costs of utilities by having either an obligation to pay a utility bill directly to a utility company or in non-subsidized rent which includes utilities, and
2. Must be a U.S. Citizen or a Qualified Non-Citizen with Legal Permanent Resident (LPR) status.
3. An eligible applicant must execute a sworn affidavit (**ATTACHMENT 2**) stating that the documentation provided as listed in Exhibit I Instructions For Verifying Citizenship and Non-Citizen Legal Permanent Resident (LPR) Status during the verification process is/are true
  - a. Contractors who determine eligibility for these programs will be required to ensure that a sworn affidavit is obtained in a way that does not delay the eligibility determination process, or add cost to the process for the applicant.
  - b. Eligible applicants are exempt from providing an affidavit only if they are 60 years of age or older, if they are Tribal Members, or if they are disabled or have an incapacity of the body or mind which makes them unable to supply such affirmation.
4. Applicant must show an energy burden, and accumulate the required number of points.

**302. Residency**

Applicant must be a resident of Arizona. Services cannot be authorized or delivered to an applicant who is traveling through the state or living in Arizona for a temporary reason. Assistance may be provided to homeless households if they are requesting assistance to establish utility services.

**The applicant shall not be a resident of an institution. Institutions include but are not limited to:**

- ◆ Hospitals
- ◆ Licensed Domiciliary Care Facilities (family care homes, homes for the aged and family care homes for developmentally disabled adults)
- ◆ Intermediate Care Facilities
- ◆ Skilled Nursing Facilities or Homes
- ◆ Alcohol and Drug Rehabilitation Centers or Treatment Programs
- ◆ Dormitories
- ◆ Temporary protective facilities, such as domestic violence shelters, etc.
- ◆ Prisons

**303. Previously Granted Applicants**

If two parties, previously considered as one household, receive a LIHEAP regular or Supplemental benefit, then separate, neither party may again receive a regular LIHEAP payment during the same 12-month period. If neither party has received a

Supplemental benefit, an application may be taken and if eligible, payment may not exceed the **\$500 limit**.

**304. Abandonment/Incarceration/Death**

If the wage earner abandons the household, is incarcerated or dies, the intake worker should consider only the income of any remaining family members.

**305. Tribal Members**

If an applicant is a member of a tribe that receives LIHEAP funding directly from the Federal Department of Health & Human Services (DHHS) or contracts with the State and resides on reservation land, you are not required to provide utility assistance benefits.

Note: If a tribe does not receive LIHEAP funding directly from the federal or state government, tribal applicants must be served by the LIHEAP provider serving the local geographic area in the same manner as other applicants. Following is a list of Arizona tribes that contract with the State or directly with DHHS.

**Tribes - Direct DHHS Funding**

Cocopah Tribal Council  
Colorado Indian Tribe  
Gila River Pima-Maricopa Community  
Navajo Nation  
Pascua Yaqui Tribe  
Quechan Indian Tribe (Fort Yuma)  
Salt River Pima/Maricopa County  
San Carlos Apache Tribe  
Fort Mohave Tribe

**Tribe Contracting with the State**

Tohono O'Odham Nation

**306. Time Limits**

Regular LIHEAP shall be authorized only once in a twelve consecutive month period, which begins on the eligibility date determined by the contract agency.

**307. Allowable Categories for Financial Assistance**

LIHEAP Benefit payments will be utilized to provide the following services:

1. Utility Payments for heating/cooling bill assistance.
2. Temporary Emergency Shelter (if needed due to energy related crisis).
3. Water bills (related to evaporative cooling for bills incurred for the months of May 1 through October 31).
4. Payment to landlords (when utility costs are included in rent).

**400. Eligibility Determination and Completing the LIHEAP Worksheet**

LIHEAP benefits are targeted to assist low-income households, particularly those with the lowest income, that pay a high proportion of their income for home energy. There are three (3) areas that are used to complete the LIHEAP Worksheet (**ATTACHMENT 3**) and determining LIHEAP benefits:

**01. Income**

After determining the monthly gross income for the household, use the Percent of Poverty Display-Monthly Household Size Gross income chart (**ATTACHMENT 4**) to determine percent of poverty and number of points for the household.

<b>% of Poverty</b>	0% to 74%	5 Points
	75% to 100%	4 Points
	101% to 125%	3 Points
	126% to 150%	2 Point
	151% to 200%	1 Point

**02. Energy Burden**

Energy Burden is determined by dividing the household's utility costs by the 30 days income.

5%	or	Less	0 Points
6%	-	10%	3 Points
11%	-	15%	4 Points
16%	-	20%	5 Points
21%	or	Higher	6 Points

- When an application is taken, if the client utilizes electric and gas utilities, both bills will be used to determine the energy burden. If the applicant does not have both bills at the time of application, **the maximum amount of \$50 can be used for gas or propane (only if the client uses either)**; for electricity, a current one-month billing amount can be obtained by calling the utility company, and for wood a maximum of **\$200** can be considered to calculate the household's energy burden.

- If utilities are included in the rent and the landlord refuses to specify the utility portion, a maximum of **\$200** can be considered to calculate the household's energy burden.
- If the applicant has both the electric and gas bills, use a one-month billing amount from each of the bills. If the client has receipts for the purchase of propane for one month's use, the caseworker must use that amount. If the amount covers a 6 (six) month usage, then divide the amount by 6 (six) to determine a 30 day usage.
- Only a one (1) month billing cycle for a utility bill is to be considered in determining the energy burden. It can be the past due amount if it covers a one-month period or the current month's bill. The amount that would be the most beneficial to the client should be used to calculate the energy burden. If the household is solely electric, use only one month's billing amount.
- If the household is requesting a deposit for utilities, use the required deposit amount(s) including disconnect, re-connect and late fees to determine the energy burden. If a deposit is needed for both gas and electric, use both amounts to determine the energy burden.
- If the applicant has no bills for gas or propane or the Case Worker cannot make contact with a utility vendor than the Case Worker can note the application as such and this will suffice as the client statement verifying usage of either gas or propane (can only be used for this purpose) once the application is signed by the applicant and the Case Worker.

**03. Energy Need**

- Priority points will be given to households that include a member of a vulnerable population. This includes:

<b><i>Elderly</i></b>	<b><i>1 Point</i></b>
<b><i>Working Poor</i></b>	<b><i>1 Point</i></b>
<b><i>Disabled</i></b>	<b><i>1 Point</i></b>
<b><i>Child age 6 and Under</i></b>	<b><i>1 Point</i></b>

- **"Elderly"** is defined as any individual age 60 and over.
- ***"Working poor" is defined as any eligible household with at least one member who received or is due earnings from any type of employment or receiving unemployment benefits, within 30 days prior to the date of application.***
- A **"handicapped" individual** is defined as any person in the household with a permanent or temporary disability. The handicapped status on the application must be marked yes.
- A maximum of 1 point can be given in each category. 1 point for elderly, 1 point for working poor, 1 point for a disabled household member and 1 point for a child age 6 or under living in the household. The household will receive 1 point for a child age 6 or under regardless of the number of children in the household.

**TO DETERMINE BENEFIT PAYMENT LEVELS, THE FOLLOWING GUIDELINES WILL BE FOLLOWED:**

<b>Total Points</b>	<b>Payment Levels</b>
<b>1 - 2</b>	<b>\$ 75 - \$ 160</b>
<b>3 - 6</b>	<b>\$ 125 - \$ 320</b>
<b>7 - 11</b>	<b>\$ 175 - \$ 480</b>
<b>12 - 15</b>	<b>\$ 225 - \$ 640</b>

- Calculation of points should be rounded to the nearest whole number using standard rounding rules: .5 and over-round up and .4 and below-round down.
- Benefit levels must be within the point ranges.
- Minimum payment level for the point range **must be made**.
- Maximum payment level for the point range **cannot be exceeded**.

**500. LIHEAP SUPPLEMENTAL BENEFIT**

A LIHEAP payment and a supplemental payment cannot be given at the same time, unless the full maximum amount has been issued for the LIHEAP payment level based on total points. **The supplemental payment can be used as a second energy benefit or utility deposit, only if the household has a shut off or delinquency notice, or an eviction notice if utilities are included in rent.**

- A crisis must exist in order to issue a supplemental payment and the crisis must be clearly and fully documented on the application.

**A crisis is defined as:**

**A shut off or delinquency notice or if utilities are included in the rent, an eviction notice.**

- If a household has an eviction notice and utilities are included in the rent, the caseworker may authorize a payment up to the maximum supplemental payment amount of \$500.
- The point system is not applicable for supplemental payments.
- **Supplemental payments must be made within the payment guidelines of \$20 minimum to \$500 maximum.**

600 **Financial Eligibility for the LIHEAP Program effective: July 1, 2010 to June 30, 2011**

*For the Low Income Home Energy Assistance Program (LIHEAP) a household's total gross countable income for the past 30 days including the date of application shall not exceed 200% of the Federal Poverty Guidelines.*

601 **Income**

This section describes various kinds of income used to determine eligibility. These policies and procedures are applicable to all households who apply for services from the Low Income Home Energy Assistance Program (LIHEAP) or Short Term Crisis Services (STCS).

**.01 Countable Incomes**

EARNED and/or UNEARNED income will be considered in determining eligibility for services. The gross amount of income prior to deductions will be counted unless otherwise specified.

Income will be counted as received at the time it is made available to the household. A check is considered **received** when it is added to the deposited account, put in the hands of the client, or made available to the client.

**Example:**

Friday is a regularly scheduled payday. Client requests paycheck that is available on Friday, March 31, 2000 be mailed due to illness. The check was received in April. The check will be counted as **received** on March 31<sup>st</sup>.

Regular monthly income deposited directly into a financial institution (e.g. SSA, SSI, VA, etc.) will be considered countable income in **the month for which it was intended**. Count the income in the month it is intended, even when it was actually received in the prior month.

**Example:**

SSA deposited April's social security check on March 31, 2000 because April 1<sup>st</sup> (normal day of deposit) was a Saturday. The **month for which it is intended** is April. Count the social security check received April 1st.

**Non Recurring lump sum payments are counted as both a resource and income.** When a portion of the lump sum is intended for the current month, only that portion is countable income. The balance would be counted as a resource. Sources of lump sum payments include but are not limited to: CA, GA, SSA, SSI, VA, and UI.

**Example:**

Client receives a **non-recurring lump sum payment** from SSA in the amount of \$1,800 in June. Client was awarded \$600 per month. The \$1,800 is for the months of April, May, and June. Count \$600 as income for June. The remaining \$1,200 is counted as a resource because it is back payments for the prior months of April and May.

**.02 Individuals Who's Income Must Be Counted**

A. Any income of a household member age 18 and older will be counted, including ineligible household members. Income for all persons ages 16 and 17, **who do not attend school full time**, will be counted.

**.03 Individuals Who's Income Will Not Be Counted**

- A. Any and all earned and unearned income for persons ages 16 and 17 who attend school full time is not counted.
- B. When domestic violence occurs, the income and resources of the abuser are not counted as long as domestic violence is the crisis reason, and the abuser is no longer in the household.(see section 304.01)
- C. When domestic violence occurs, the income and resources of the applicant are not counted as long as the applicant does not have access to his/her income and resources, and the abuser is no longer in the household

**602 Earned Income**

Earned income is defined as either cash, or in-kind income received as compensation for wages, salaries, commissions, or profit through employment or self-employment.

**.01 Types of Earned Income** Earned income includes but is not limited to:

- A. **ARIZONA TRAINING PROGRAM (ATP)** - Salaries to handicapped persons working in a sheltered workshop situation are counted. Verbal or written verification may be obtained from ATP.
- B. **BABY-SITTING OR CHILDCARE INCOME** - Earnings from baby-sitting are counted as self-employment income. Verbal or written verification may be obtained from DES or the person paying for the care.

**CAN OR BOTTLE SALES OR OTHER USABLE DISREGARDS** - Income from these sales is counted as self-employment income. Client should have receipts for such sales. If receipts are not available, a signed and dated client statement would be acceptable.

**CONTRACT INCOME** – Income received by individuals who are employed under a contract that states a specific length of time and a specific income amount to be paid during that time.

- E. **HOUSEKEEPER OR HOME HEALTH AIDES** - Income earned as a housekeeper or home health aide is countable. Verbal or written verification may be obtained from the employer. Income is only counted once, if living in the household and paid by the applicant.

**IN-KIND EARNED INCOME** - Work performed by a client in exchange for room, board, or other needs is earned in-kind income. The employer will establish the monetary value of the service. A collateral contact or a signed and dated statement from the employer, or client can verify in-kind income. The employer may be, but is not limited to:

1. A landlord who is providing rent, or portions of the rent or utilities in exchange for work.
2. A storeowner who gives goods, such as groceries, clothes, or furniture in exchange for work.
3. An individual who receives a car, tools, trailer, building material, gasoline, etc. in exchange for work.

**JURY PAY** - Counted as earned income. Check stubs should be available to verify income.

**MILITARY INCOME** – Wages received while in the military are countable. This includes: base pay (BP), Proficiency pay (PRO), rations (separate/leave), basic allowance for housing (BAQ), basic allowances for subsistence (BAS), and variable housing allowance (VHA) when considered an entitlement. Use the leave and earnings statement, when available, to verify the amount of earned income issued.

**RENTAL INCOME** – Any monies received from rental of property, including boarders, less expenses, are counted as earned income if work is involved.

1. Work includes, but is not limited to, managing rental property requiring maintenance, collection of rent, or accounting functions. There is no time requirement for number of hours worked.
2. If a person's income from rental of property does not require work, rent is considered unearned income.

**J. SELF-EMPLOYMENT INCOME AND EXPENSES** - Self-employment includes but is not limited to, businesses such as grocers, craftsmen, taking in boarders, ranching, farming, swap meet sales, odd jobs, baby-sitting, can and bottle collection, janitorial, guide for hunting or fishing, or any wholesale or retail sales.

Clients are not considered self-employed if they work for a business or another person on a commission basis, unless the client reports and pays his/her own withholding taxes for state, federal and FICA.

Acceptable verification for self-employment is:

1. IRS Form 1099
2. Ledger statement
3. Client statement

When calculating self-employment income, the client may deduct any business expenses. Gross incomes minus business expenses equals' countable income.

**K. VOCATIONAL REHABILITATION (VR)** – Wages from VR sponsored on-the-job training (OJT) are countable.

**L. WAGES** – Gross earnings from employment, prior to any deductions, garnishments, allowances, or adjustments. Special benefits or deductions connected with employment earnings are counted as follows:

1. Advances, bonuses and commissions must be counted as earned income in the month received.
2. When tips are shown on the pay-stub and the household claims a lesser amount but has no record of actual tips received, count the amount on the pay-stub.
3. When tips are not shown on the pay-stub, obtain the individuals' written tip record. When not available, obtain a written statement from the household or contact the employer.

**M. WORKFORCE INVESTMENT ACT (WIA)** – Earnings from employment through WIA will be counted for persons age 18 and over.

- N. WORK STUDY - Earnings received from the following: Work-study programs, when the funds do not come under Title IV of the Higher Education Act; Veterans Administration work-study program.

**.02 Verification of Earned Income**

Gross earned income must be verified prior to initial approval. All gross earned income received by the household members ages 18 years and older (16 unless a full time student) is counted in determining the total income. Contract agency staff are responsible for obtaining accurate gross amounts from the client or employer.

Acceptable verification includes but is not limited to:

1. Paycheck stubs(s);
2. Copy of check, when gross earnings are listed;
3. Employer's statement that is signed and dated. (When employer verification would jeopardize the applicant's job, other means of verification must be pursued.)
4. The employer's statement must include the following:  
Name, address and telephone number of employer,  
Frequency of receipt,  
Gross amount of income,  
Day of the week pay is received.
5. Letter from the agency providing government sponsored training;
6. Assistance payment records;
7. Award letter;
8. Bank records;
9. Court records;
10. DCSE printouts;
11. Divorce or separation papers or contact with the Clerk of the Court;
12. The current check, when it reflects gross income. Federal government checks are not to be photo-copied; Signed statement from agency or payer providing income,
13. Client's statement, WHEN NO OTHER VERIFICATION CAN BE OBTAINED. All other possible verification sources must be exhausted before accepting client statement. Document all attempts to verify and why the client's statement is being allowed.
14. Verification of Terminated Income
  1. When job termination is reported in the prior 30 days to the date of the application, verify the following:
    - The date of termination;
    - Gross income received in the prior 30 days;
    - The last payday and the gross amount paid.

**603 Unearned Income**

Income, which was not received as a result of the performance of a service, or earned from sources other than employment, self-employment or in-kind income.

**.01 Types of Unearned Income: Countable unearned income includes but is not limited to:**

- A ALIMONY OR SPOUSAL MAINTENANCE** - A court-ordered support amount, which a legally divorced or separated person pays to the spouse, must be counted. Verbal or written verification may be obtained from the office of the Clerk of the Court or Division of Child Support Enforcement.

- B** ASSISTANCE PAYMENTS - such as General Assistance (GA) or Cash Assistance (CA) from this state, as well as, other states must be counted.
- C** BUREAU OF INDIAN AFFAIRS (BIA)
1. BIA-General Assistance payments are public assistance and treated as any other assistance payments.
  2. Clothing allowances available to the individual, whether in cash or a voucher made out to the individual must be counted.
  3. Tribal Work Experience Program (TWEPE) or Tribal Assistance Project Program (TAPP). Exclude any portion of the amount, which is an incentive payment.
- D** CHILD SUPPORT - Any payment received directly by the household from an absent parent or paid through the Division of Child Support Enforcement or Clerk of the Court. All child support income will be considered unearned income.
- E** COMMISSIONS - Commissions received from a terminated source of employment are counted as unearned income.
- F** CONTRIBUTIONS AND COMPLIMENTARY ASSISTANCE - Cash contributions must be counted as unearned income, if not considered as gifts or child support.
- G** INDUSTRIAL COMPENSATION - The amount of the compensation, after attorney's fees are deducted, is unearned income. The Industrial Claim award letter will verify amount being paid but will not verify the attorney's fees.
- H** INDIAN GAMBLING INDUSTRY - Per capita disbursements are considered income in the month received. Any amount remaining in a following month will be counted as a resource.
- I** INSURANCE
1. Insurance payments made directly to the insured must be considered income IF the money is not used to replace or repair insured items, such as car, roof repair, or medical bills.
  2. Insurance benefits, which are used for or are intended to meet basic daily needs, are counted as unearned income.
- J** INTEREST, DIVIDENDS, AND ROYALTIES - Any interest, dividend, or royalty payments, exceeding \$50 in the 30 days prior to and including date of application made directly to the individual, are counted as unearned income. Funds left on deposit or converted into additional securities are a resource.
- K** LEGAL SETTLEMENTS - Legal settlements, less attorney fees and medical bills paid by the attorney out of the settlement, are unearned income in the month received.
- L** MORTGAGES AND SALES CONTRACTS - Payments received from mortgages or sales contracts are counted. Includes payment received from a reverse mortgage.
- M** LUMP SUM PAYMENT – Any form of income received in a lump sum payment, including but not limited to:
1. Inheritance;
  2. Winnings from lotteries, bingo, or any other form of gambling;
  3. Insurance settlements including any amount withheld as a lawyer's fee;
  4. Property Tax Credit;
  5. Rebates/Credits;
  6. Refund Deposit;
  7. Severance Pay.
- N** RENTAL INCOME - If the property owner does not perform any services in order to receive the income, it is unearned income.

- O RETIREMENT INCOME - The payments from retirement funds, pensions, and annuities must be considered unearned income.
- P SOCIAL SECURITY ADMINISTRATION BENEFITS\* - SSA benefits (sometimes referred to as RSDI-Retirement, Survivors, and Disability Insurance) are granted to eligible wage earners and/or their dependents or survivors and are counted as unearned income. **FOR THE LIHEAP PROGRAM DO NOT INCLUDE THE MEDICARE DEDUCTION IN THE TOTAL AMOUNT**
- Q SUPPLEMENTAL SECURITY INCOME (SSI) - Monthly cash payments made under the authority of Title XVI of the Social Security Act, as amended, to the aged, blind, and disabled (A Federally financed public assistance program). The recipient need not have contributed to the Social Security Fund to be eligible for SSI benefits.
- R STRIKE PAY - from unions to striking employees is not wages and must be considered unearned income. If there is no check stub, verification can be obtained by calling the Union.
- S UNEMPLOYMENT INSURANCE (UI) - Considered unearned income in the month received. The amount of income can be verified by a check stub or contacting the local UI office.
- T VETERANS ADMINISTRATION BENEFITS (VA) - Retirement, Survivors, Disability, and Educational Benefits are paid to veterans and their dependents or survivors. Only the amount of the benefit, which is actually received by the person whose income must be included, will be counted.

## **.02 Verification of Unearned Income**

- A. Gross income must be verified before approval. Acceptable verification includes but is not limited to:
  1. Assistance payment records;
  2. Award letter;
  3. Bank records;
  4. Court records;
  5. Division of Child Support Enforcement (DCSE) print-outs;
  6. Divorce or separation papers or contact with the Clerk of the Court;
  7. The current check when it reflects gross income. Federal government checks are not to be photocopied;
  8. Signed statement from the agency or payer providing the income;
  9. Client's statement **WHEN NO OTHER VERIFICATION CAN BE OBTAINED**. All other possible verification sources must be exhausted before accepting a client statement. Caseworker must document all attempts to verify why the client's statement is being allowed.

## **604 Excluded Income**

Only the income discussed in this section will be excluded.

- A. Insurance payments designated to repay a specific bill, debt, or estimate, which cannot be used for other needs, is not countable;
- B. WIC - Payments or benefits to persons participating in the WIC program (Special Supplemental Food Program for Women, Infants, and Children) must be disregarded;
- C. Retirement, pension, and annuity accounts are not countable as long as the money **cannot** be withdrawn **without penalty**;
- D. Bureau of Indian Affairs (BIA) work-study program. This includes monies provided for educational and living expenses;
- E. Work study programs funded under Title IV of the Higher Education Act;

- F. Any portion of an education grant or scholarship used for books & supplies, tuition or fees;
- G. Earned income of a child 16 and 17 years of age who is a full time student;
- H. Earned income of a child under 16 years of age;
- I. Cash gifts of \$50.00 or less per month per household member;
- J. Non-cash benefits provided on behalf of a household member but not paid directly in the name of the household member, including but not limited to vouchers for food, clothing, or housing;
- K. Loans that need to be repaid;
- L. Money that a household member receives and uses for the care and maintenance of a person who is not a household member;
- M. Payments/vouchers received by the household from the State for the health/well-being of a foster child residing in the household.
- N. Stipends from senior companion programs –VISTA, Title II, Title V;
- O. Earned Income Tax Credit;
- P. Income Tax Refund;
- Q. Reimbursements, e.g.; mileage, gas, lodging, and meals;
- R. Agent Orange Payments;
- S. Ameri-Corps Network Program payments for living allowances, earnings, and in-kind aid. The Ameri-Corps Network Program includes but is not limited to:
  1. Arizona Conservation Corp,
  2. Arizona Council of Centers for Children and Adolescents (ACCCA),
  3. Border Volunteer Corps (BVC),  
Mesa Ameri-Corps Community Services Partnership,  
Rural Health Office, University of Arizona,  
Youth in Action, Learn and Serve (NAU),  
Child Care Food Program payments,
- T. Disaster or emergency assistance provided by the Federal Disaster Relief Act or comparable assistance provided by States, local governments and disaster assistance organizations;
- U. Housing and Urban Development (HUD) – Some individuals residing in HUD housing are granted benefits either in the form of credits against their rent or as cash allowances. The cash allowance must be used for the purpose intended, (rental or utility obligation).
- V. Education and Employment: (a) Any wages, allowances, or reimbursement for transportation and attendant care cost, unless accepted on a case-by-case basis, when received by an eligible handicapped individual employed in a project under Title VI of the Rehabilitation Act of 1973 as added by Title II of Public Law 95-602 (92 Stat. 2992,29 U.S.C. 765(b)(c) )
- W. **Payments to members of specific Indian Tribes and Groups:**
  - (a) Settlement fund payments and the availability of such funds to members of the Hopi and Navajo Tribes under section 22 of Public Law 93-531 (88 Stat. 1722) as amended by Public Law 96-305 (94 Stat. 929). Note: This exclusion applies to the income of sponsors of aliens only if the alien lives in the sponsor's household.
  - (b) Any distributions of judgment funds to members of the San Carlos Apache Indian Tribe of Arizona under section 7 of Public Law 93-134 (87 Stat. 468) and Public Law 97-95 (95 Stat. 1206). Note: This exclusion applies to the income of sponsors of aliens only if the alien lives in the sponsor's household.
- X. **Payments to Members of Specific Indian Tribes and Groups:**
  - (a) Settlement fund payments and the availability of such funds to members of the Hopi and Navajo Tribes under section 22 of Public Law 93-531 (88 Stat. 1722) as amended by Public Law 96-305 (94 Stat. 929). Note: This exclusion applies to the income of sponsors of aliens only if the alien lives in the sponsor's household.

- (b) Any distributions of judgment funds to members of the San Carlos Apache Indian Tribe of Arizona under section 7 of Public Law 93-134 (87 Stat. 468) and Public Law 97-95 (95 Stat. 1206). Note: This exclusion applies to the income of sponsors of aliens only if the alien lives in the sponsor's household.

**Y. Adoption Subsidies/Reimbursements**

Adoption Subsidy payments are federally, state, or locally funded assistance payments provided to children with special needs. These payments are intended to help a child whose special needs otherwise might hinder their adoption. Adoption Subsidy payments vary depending on the special needs of the child. Adoption subsidy payments are NOT COUNTABLE as income.

**Z. Other:**

- a. Compensation provided to volunteers by the Corporation for National and Community Service (CNCS), unless determined by the CNCS to constitute the minimum wage in effect under the Fair Labor Standards Act of 1938 (29 U.S.C. 201 et seq.), or applicable State law, pursuant to 42 U.S.C. 5044(f)(1). Note: This exclusion does not apply to the income of sponsors of aliens.
- b. Any assistance to an individual (other than wages or salaries) under the Older Americans Act of 1965 as amended by Section 102 (h)(1) of Pub. L. 95-478 (92 Stat. 1515, 42 U.S.C. 3020a).
- c. Amounts paid as restitution to certain individuals of Japanese ancestry and Aleuts for losses suffered as a result of evacuation, relocation, and internment during World War II, under the Civil Liberties Act of 1988 and the Aleutian and Pribilof Islands Restitution Act, sections 105(f) and 206(d) of Public Law 100-383 (50 U.S.C. App. 1989 b and c).
- d. Payments made under section 6 of the Radiation Exposure Compensation Act, Public Law 101-426 (104 Stat. 925, 42 U.S.C. 2210).
- e. Payments made to individuals because of their status as victims of Nazi persecution excluded pursuant to section 1(a) of the Victims of Nazi Persecution Act of 1994, Public Law 103-286 (108 Stat. 1450).
- f. Any matching funds from a demonstration project authorized by the Community Opportunities, Accountability, and Training and Educational Services Act of 1998 (Pub. L. 105-285) and any interest earned on these matching funds in an Individual Development Account, pursuant to section 415 of Pub. L. 105-285 (112 Stat. 2771).
- g. Any earnings, Temporary Assistance for Needy Families matching funds, and interest in an Individual Development Account, pursuant to section 103 of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Pub. L. 104-193, 42 U.S.C. 604(h)(4)).
- h. Payments made to individuals who were captured and interned by the Democratic Republic of Vietnam as a result of participation in certain military operations, pursuant to section 606 of the Departments of Labor, Health and Human Services and Education and Related Agencies Appropriations Act of 1996 (Pub. L. 105-78).
- i. Payments made to certain Vietnam veterans' children with spinal bifida, pursuant to section 421 of the Departments of Veterans Affairs and Housing and Urban Development, and Independent Agencies Appropriations Act of 1997 (Pub. L. 104-204, 38 U.S.C. 1805(a)).
- j. Payments made to certain Vietnam veterans' children with spinal bifida, pursuant to section 421 of the Departments of Veterans Affairs and Housing and Urban Development, and Independent Agencies Appropriations Act of 1997 (Pub. L. 104-204, 38 U.S.C. 1805(a)).

## **605 Income Source**

The income eligibility determination will be completed prior to approving financial assistance.

### **.01 Documentation**

The case file must be clearly documented. Documentation must include, but is not limited to:

1. Discussion with individual;
2. Verification received from the income source:
  - a.. Hours worked
  - b. Pay period end date
  - c. Actual pay dates
  - d. Frequency of pay;
3. Extra income – such as, bonuses, tips, commissions, overtime;
4. Explanation of how self-employment income was determined;
5. Date, name, phone number and information about the collateral contacts;
6. Identify the time frame by dates for the 30-day period prior to and including the date of application, i.e., from (month/date) to (application date);
7. Using the frequency and the day of the week paid from a calendar; determine the number of pay dates in the thirty-day period.

### **.02 Calculating Income**

- A. Identification of the 30-day period prior to and including the date of application: i.e., from (month/date) to (application date);
- B. The number of pay dates in the thirty-day period; determine frequency of pay date and the day of the week paid.
- C. Write the received dates and the gross income.
- D. Total this and any other income for the household to calculate the gross income. This process is used to determine if the household is eligible under the required poverty guidelines for LIHEAP.

## **606 Future Income**

An agency cannot deny assistance through the **Low Income Home Energy Assistance Program (LIHEAP)** programs due to the household's lack of resources to meet future needs.

## **700 Decision Notices**

### **701 Approval Notices**

When the decision is to approve assistance for **Low Income Home Energy Assistance Program (LIHEAP)**, the agency approval notice or EN005 application completed approval page is given to the applicant. No further action will be required. If the client refuses the copy of the completed approval page, Case Manager must document this in the file.

### **702 Denial Notices**

When the decision is to deny or reduce assistance, the denial reason must be stated on the denial letter, or on the EN005 application, which is given to the applicant.

The applicant has the right to appeal this decision. Instructions for initiating the appeal process are listed below in Section 700, Grievance Hearing.

The applicant is handed or mailed a hard copy of the denial notice within five (5) working days of application date.

## **800 PAYMENT PROCESS**

The contracted agencies will make direct payments to vendors, and will receive reimbursement through the DES-DAAS contract invoice process.

**900 GRIEVANCE HEARING**

A grievance hearing is a process through which any individual may have a decision reviewed by an impartial third party.

A hearing may be conducted in an informal manner and without adherence to the rules of evidence required in judicial proceedings. Neither the manner of conducting the hearing or the failure to adhere to the rules of evidence required in judicial proceedings shall be grounds for reversing any administrative decision or order, providing the evidence supporting such decision or order is substantial, reliable, and probative.

**901 Right to File**

**.01 Reasons for Requesting a Grievance Hearing**

An opportunity for a grievance hearing shall be granted to any appellant who requests a hearing because his or her application for financial assistance was denied, terminated or incurred a benefit reduction.

**.02 Time Limits**

The appellant must submit a written request to the Contract Agency within ten (10) working days of the date on the EN005 application (EN005) denial page, or date of post-marked letter denying eligibility or affecting assistance. The request must be signed, dated, and contain the reason for requesting the hearing.

**.03 Notification Requirements**

During the interview process, the appellant must be informed of the right to request a grievance hearing, the procedure for requesting it, and the right to be represented by anyone of his/her choice.

**902 Contract Agency's Responsibilities**

The Contract Agency will provide the applicant with a copy of the EN005 application. The Contract Agency is also responsible for the following hearing related activities:

- A. Upon written or verbal request, provide the appellant with the phone number and address of any legal service available.
- B. Upon written or verbal request, provide the appellant with materials needed to prepare for the hearing, including copies of pertinent documents in his/her case file.
- C. The fair hearing notice shall be given to the appellant at least twenty (20) calendar days prior to the date set for the hearing and include: date, time, address, and a statement of the issues involved.
- D. Determine whether a bilingual interpreter or other alternative form of communication is needed.
- E. The Contract Agency shall render a written decision to the appellant no later than twenty (20) calendar days from the date of the grievance hearing.
- F. Appellant must be advised of their right to appeal the decision and process by which to do so.

**903 Appeals**

**.01 Appellant's Appeal of Contract Agency's Decision**

- A. In the event the appellant wishes to appeal the decision of the Contract Agency, the Program Manager at the Department of Economic Security, Division of Aging and Adult Services level will be responsible for conducting the appeal hearing.

- B. The appellant must submit a written request to DES-DAAS within ten (10) working days of the post-mark date of the Contract Agency's grievance decision. The request must be signed, dated, and contain the reason for requesting the hearing. The request must be submitted to:

**DEPARTMENT OF ECONOMIC SECURITY - Site Code 086Z**  
**Division of Aging and Adult Services**  
**COMMUNITY ACTION PROGRAMS (CAP) Manager**  
**P.O. Box 6123**  
**Phoenix, AZ 85005-6123**

**NOTE:** All documents given to the public must include a reasonable accommodation statement.

**.02 Contract Agency Responsibilities to Division of Aging and Adult Services**

The Contract Agency is responsible for providing the following information to DES-DAAS within ten (10) working days from the request:

- A. A grievance packet that contains the application, verification documents which justify the agency action taken, case notes, print outs and all other information relevant to the issue, and a copy of the denial notice given to applicant.
- B. A brief summary of the circumstances supporting the Contract Agency's determination which is at issue including copies of all pertinent documentation.
- C. The date the hearing was conducted.

**.03 Division of Aging and Adult Services Responsibilities**

DES-DAAS staff is responsible for the following hearing related activities:

- A. Upon written or verbal request, provide the appellant with the phone number and address of any legal service available.
- B. Upon written or verbal request, provide the appellant with materials needed to prepare for the hearing, including copies of pertinent documents in his/her case file.
- C. The fair hearing notice shall be given to the appellant at least twenty (20) calendar days prior to the date set for the hearing and include: date, time, address and a statement of the issues involved.
- D. Determine whether a bilingual interpreter or other alternative form of communication is needed.
- E. Program Manager shall render a written decision to the appellant and Contract Agency no later than twenty (20) calendar days from the date of the grievance hearing.

**.04 Appellant's Appeal of Community Division of Aging and Adult Services Decision**

- A. If the appellant wishes to appeal the decision of the Program Manager, Division of Aging and Adult Services (DES-DAAS), the Executive Staff Assistant will be responsible for conducting the appeal hearing and making the final determination.
- B. The appellant must submit a written request to the DES-DAAS Executive Staff Assistant within (10) ten working days of the post-mark date of the Program Manger's letter denying eligibility or reducing assistance. The request must be signed, dated, and contain the reason for requesting the hearing. The request must be submitted to:

**DEPARTMENT OF ECONOMIC SECURITY**  
**Division of Aging and Adult Services**  
**Community Action Programs Unit**  
**Site Code 086Z**  
**Executive Staff Assistant**  
**P.O. Box 6123**  
**Phoenix, AZ 85005-6123**

**.05 Contract Agency's Appeal Rights**

- A. If the Contract Agency wishes to appeal the decision of the Program Manager, Division of Aging and Adult Services (DAAS), the Executive Staff Assistant will be responsible for conducting the appeal hearing and making the final determination.
- B. The Contract Agency must submit a written request to the Executive Staff Assistant at the Division of Aging and Adult Services (DAAS) within (10) ten working days of the post-mark date of the Program Manger's letter of the appellant's appeal decision. The request must be signed, dated, and contain the reason for requesting the hearing. The request must be submitted to:

**DEPARTMENT OF ECONOMIC SECURITY**  
**Division of Aging and Adult Services**  
**Community Action Programs Unit**  
**Site Code 086Z**  
**Executive Staff Assistant**  
**P.O. Box 6123**  
**Phoenix, AZ 85005-6123**

**.06 Arizona Department of Economic Security**

The Executive Staff Assistant is responsible for the following appeal hearing activities:

- A. Upon written or verbal request, provide the appellant with the phone number and address of any legal service available.
- B. Upon written or verbal request, provide the appellant with materials needed to prepare for the hearing, including copies of pertinent documents in his/her case file.
- C. The fair hearing notice shall be given to the appellant at least twenty (20) calendar days prior to the date set for the hearing and include: date, time, address, and a statement of issues involved.
- D. Determine whether a bilingual interpreter or other alternative form of communication is needed.
- E. The Executive Staff Assistant shall render a written decision to the appellant, Contract Agency, and Program Manager no later than twenty (20) working days from the date of the grievance hearing.

## **1000 Operating Principles**

### **1001 Nondiscrimination**

#### **.01 Requirements**

- A. In compliance with Title VI of the Civil Rights Act of 1964 and Executive Order 12250, no individual in Arizona shall be excluded from participation in, denied benefits or subjected to discrimination under any program or activity receiving Federal funds, because of:
1. Race;
  2. Color;
  3. National origin;
  4. Handicap;
  5. Religion; or
  6. Sex
- B. In compliance with the Age Discrimination Act of 1975, no individual shall be denied services or participation or be subjected to discrimination in any of its programs or activities on the basis of age.

### **1002 Information Available to the Public**

The items which govern program administration will be maintained in the DES-DAAS office, 1789 W. Jefferson, Phoenix, Arizona 85005 for examination during regular office hours.

- o **Low Income Home Energy Assistance (LIHEAP)** – State Plan and the LIHEAP policy manual

### **1003 Confidential Information**

Public law and federal regulations place restrictions on the release of confidential information, and set guidelines for the disclosure of non-confidential materials. All applications, records, files and communications of DES and contractors, relating to specific applicants for assistance and recipients of services funded by DES, are confidential records.

All information, regarding an applicant or recipient, is confidential and may be disclosed only for purposes of determining eligibility, providing services, or investigating suspected fraud in connection with the program. Applicants for services authorize access to their records by signing the application. Anyone not authorized on the application must have the applicant's written approval to access information.

Information that can be exchanged must pertain to the eligibility of the applicant, and excludes items that do not address eligibility, i.e., and personal details. Inappropriate disclosure of information can result in severe disciplinary action, or could result in the suspension of the contract agreement.

Access to information by inappropriate, unauthorized individuals or parties shall be considered a violation of the individual's right to confidentiality. Care should be taken to secure all files in the office so that unauthorized personnel do not have access to them. All records shall be open to any and all federal, state, and contractor auditors and/or examiners in the course of their regular audits.

General information, policy statements, or statistical materials, which cannot be directly identified to any individual or family, are not considered confidential information. They may be given to, or provided by: agencies, helping organizations, or contracted parties, unless restricted by Arizona statutes, federal regulations, or court orders.

When the decision reported is to approve assistance, the approval notice or EN005 application is information only and no further action is required.

When the decision reported is to deny or reduce funded assistance, the reason for such denial must be stated on the intake form, denial letter, or on the EN005 application.



**CASE RECORD REVIEW – PAGE 2 OF 2**

AGENCY: Cocoonho County Community Services

SERVICE: UTILITY ASSISTANCE/LIHEAP

MONTH REVIEWED: \_\_\_\_\_

FUND SOURCE LIHEAP

TARGET GROUP: Low Income

SSN or Other Client ID #	N/A	YES	NO	COR ACT	REC	N/A	YES	NO	COR ACT	REC	N/A	YES	NO	COR ACT	REC
8															
9															
10															
11															
12															
13															

All responses require a yes response unless an NA is appropriate.

Action required and Comments:

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**EXHIBIT I****INSTRUCTIONS FOR VERIFYING CITIZENSHIP AND NON-CITIZEN LEGAL  
PERMANENT RESIDENT (LPR) STATUS****U.S. Citizenship**

U.S. citizenship is established at birth when an applicant is born in the U.S., its territories, or possessions.

U.S. territories or possessions include any of the following:

- American Samoa
- Guam - on or after January 17, 1917
- Northern Mariana Islands – on or after November 4, 1986
- Panama Canal Zone - on or after February 26, 1904
- Puerto Rico - on or after January 13, 1941
- Swain Islands
- U.S. Virgin Islands - on or after January 17, 1917

**100. VERIFICATION OF U.S. CITIZENSHIP****TO BE POTENTIALLY ELIGIBLE APPLICANTS WHO DECLARE U.S. CITIZENSHIP  
OR LEGAL RESIDENT STATUS MUST PROVIDE DOCUMENTATION FOR  
VERIFYING, WITH THE FOLLOWING EXCEPTIONS:**

The following participants are exempt if they are receiving the following services:

- Currently receiving Social Security Disability (SSD)...
- Currently receiving Supplemental Security Income (SSI). This includes participants who move here from another state and are in the process of transferring their SSI benefits to Arizona.
- Currently receiving Medicare (g).
- Eligible in the Deemed Newborn MA category.
- Children in Foster Care assisted under title IV-B of the Social Security Act.
- Children who are recipients of Foster Care maintenance or adoption assistance payments under title IV-e.
- Children receiving adoptions subsidies.

**NOTE:**The participants receiving the service must provide an award letter or documentation as proof of receiving the service. Once the participant is no longer receiving the benefits that meet the exemption criteria they must then provide the proper and approved documentation as described in the section below.

**.01 APPROVED DOCUMENTATION**

- I. Citizenship may be verified using ANY of the documents indicated under sections A, B, C or D immediately below:

## **A. PRIMARY - VERIFICATION DOCUMENTS**

1. A birth certificate showing birth in the U.S., its territories or possessions.
2. Certificate of Birth issued by the Department of State (FS-545 or DPS-1350).
3. U.S. Passport current or expired, except limited passports which are issued for periods of less than 5 years.
4. U.S. Passport Card issued by the United States Citizenship and Immigration Services (USCIS).
5. Certificate of Naturalization (N-550 or N-570).
6. Certificate of U.S. Citizenship (N-560 or N-561).
7. Report of Birth Abroad of a U.S. Citizen (FS-240) issued by the U.S. State Department.
8. U.S. Consular officer's statement.
9. A United States Citizen Identification Card (I-197).
10. Northern Mariana Identification Card (I-873).
11. A tribal enrollment card or Certificate of Indian Blood issued by a federally recognized Indian Tribe that shows that the person is enrolled or affiliated with that tribe.
12. American Indian Card (I-872) issued by USCIS with the classification code KIC.

The benefit granting agency shall require the applicant to present a membership card or other tribal document demonstrating membership in an Indian tribe. If the applicant has no document evidencing tribal membership, the benefit granting agency should contact the Indian tribe for verification of membership.

## **B. SECONDARY - VERIFICATION DOCUMENTS**

1. An identification card for use of Resident Citizen (I-179).
2. U.S. Census record that shows the applicant's name, a U.S. place of birth and the date of birth or the applicant's age when the record was made. It must also indicate a place of birth in the U.S., its territories, or possessions
3. Religious record created within three months after birth, showing the participant's date of birth, OR the participant's age when the record was made. It must indicate a place of birth in the U.S. Territories, or Possessions.
4. Proof of employment as a U.S. Government Civil Servant before June 1, 1976
5. Early school records, showing the date of admission, the child's date and place of birth and the names and places of birth of the parents.
6. Adoption finalization papers showing the child's name and place of birth in the U.S., its territories or possessions. (When adoption is not finalized and the State will not release a birth certificate prior to final adoption, a statement from a state approved adoption agency containing the child's name and place of birth may be used. The source of information must be an original birth certificate and must be indicated in the statement).

- C. When none of the primary or secondary documents are available, accept any other document that establishes a U.S. place of birth or in some way indicates U.S. Citizenship. These include the following:**
1. Certificates of Live Birth signed by a hospital official and parent
  2. Medical records created at least five years before applying for services that list a U.S. place of birth. For children under age 16 the document must be created near the time of birth OR five years prior to the application date. These include: hospital wrist bands, crib cards, or yellow copies of hospital birth certificates indicating birth in the U.S., its territories or possessions.
  3. American Indian Census Records
  4. Verification from the U.S. Citizenship and Immigration Services (USCIS). This documentation CANNOT be expired.
  5. Verification from the Social Security Administration
  6. Verification sent directly to the agency from a local, state or federal bureau of vital records office
  7. Legal records showing the applicant's name and place of birth in the U.S., its territories or possessions.
  8. Department of Homeland Security (DHS), Verification Information System (VIS) response that validates U.S. Citizenship.
  9. Online data match screen print with the Arizona Department of Vital Records through the AHCCCS Citizenship Verification System
  10. Military papers
  11. Marriage certificate showing marriage to a U.S. male citizen before September 22, 1922
  12. Life, health or other insurance record, created at least five years before the application date. Record must indicate a place of birth in the U.S.
  13. State census records that show the participant's name, a U.S. place of birth, and the date of birth or age of the participant.
  14. Tribal census records for the Navajo or Seneca tribes. The records must be created at least five years before the application and list a U.S. place of birth.
  15. An official notification of birth registration from a U.S. State's Department of Vital Statistics.
  16. An amended U.S. public birth record that is amended more than five years from the applicant's birth.
  17. A statement signed by the physician or midwife who was in attendance at the time of birth
  18. The roll of Alaska Natives from the Bureau of Indian Affairs.

**D. When the applicant cannot obtain the Primary or Secondary forms of verification they may provide an Affidavit Attesting Citizenship. An Affidavit Attesting Citizenship must meet all of the following requirements:**

1. Be completed by a U.S. Citizen who is knowledgeable about the participant's circumstances.
2. Be signed by a U.S. Citizen that is not a member of the household.
3. Be approved by the Case Manager.

**.02 ACCEPTABLE COPIES**

**Only original or un-tampered copies of required documents are acceptable for verifying citizenship.**

## 200 VERIFICATION OF QUALIFIED NON-CITIZENS

### .01 QUALIFIED NON-CITIZEN CATEGORIES

Applicants, who state they are Non-Citizen Legal Residents, must meet at least one of the categories set forth immediately below:

#### A. **LAWFUL PERMANENT RESIDENT (LPR)**

A lawful permanent resident (LPR) is admitted into the U.S. for permanent residence under the Immigration and Nationality Act (INA). This Non-Citizen Legal Resident is potentially eligible for services when they meet any of the following:

- 1) They have been continuously lawfully residing in the U.S. and their date of entry is five years in the past or more
- 2) They entered the U.S. as a Non-Citizen Legal Resident eligible for benefits in another qualified category prior to becoming an LPR
- 3) They have a military connection
- 4) They are American Indians born in Canada who possess at least 50 per centum of American Indian Blood. These Non-Citizen Legal Residents are recognized as LPR.

These applicants normally have one of the following USCIS documents (**NOT ACCEPTABLE IF DOCUMENTS ARE EXPIRED**):

1. I-551- Resident Alien Card (Eligible for Benefits)
2. I-151- Alien Registration Receipt Card (Eligible for Benefits)
3. I-194- or unexpired passport with the words: Processed for I-551

#### **Temporary Evidence of Lawful Permanent Residence. Valid Until (Date). With the following Stamp/Annotations of Law**

- a) Adjustment Admission Stamp – Eligible when any of the following sections of law are indicated: 203(a)(7); 207;208;212(d)(5); 243(h)(with a Prucol determination);
- b) Non-Specific Admission Stamp – Eligible when the form is noted with an I-551 eligible status code
- c) Parole Admission Stamp – Eligible when the period of parole is for at least one year as verified on the stamp
- d) Replacement Admission Stamp – Eligible when the stamp displays an I-551 eligible Status Code

- e) Temporary I-551 Admission Stamp – Eligible when the key phrase reads one of the following: “Admission for Permanent Residence at
  - a. D” or “Processed for I-551 Temporary evidence of admission for Permanent Residence” and displays one of the following Status Codes: AM1; -2; -3; -6; -7; -8;

**B) ASYLEE**

An Asylee, Non-Citizen Legal Resident is granted asylum through an exercise of discretion by the Attorney General, pursuant to Section 208 of INA. This Non-Citizen is potentially eligible for benefits for a period of seven years from the date their status is granted.

**NOTE:** The eligibility period begins from the month the Asylee status is granted, NOT the month of U.S. entry.

These applicants normally have one of the following USCIS documents (NOT ACCEPTABLE IF DOCUMENTS ARE EXPIRED):

- 1. I-94 with one of the following:
  - A stamp showing grant of asylum under Section 208 of the INA to include:
    - a. AS1 - Eligible for benefits
    - b. AS2 - Eligible for benefits
    - c. AS3V92 - Eligible for benefits

**C) REFUGEE OR AMERASIAN**

A Refugee or Amerasian is admitted into the U.S. under Section 207 of INA. This Non-Citizen is potentially eligible for benefits for a period of seven years from the date that their status is granted.

These applicants normally have one of the following USCIS documents (NOT ACCEPTABLE IF DOCUMENTS ARE EXPIRED):

I-94 – endorsed to show entry as a refugee under Section 207 of the INA or entry as an Amerasian OR noted with one of the following Status Codes: NP2 - 7; P2 -6, -7, -71; RE7 -8; Z2; (Eligible for Benefits)

**D) VICTIM OF SEVERE HUMAN TRAFFICKING**

A victim of severe human trafficking is admitted onto the U.S. under the Trafficking Victims Protection Act (TVPA) of 2000. This Non-Citizen Legal Resident is potentially eligible for services for a period of seven years from the date that their status is granted. These applicants normally have one of the following USCIS documents:

- 1. I-94 – with a T Visa or Derivative T Visa (T, T-2, T-3, T-4, or T-5) (NOT ACCEPTABLE IF DOCUMENTS ARE EXPIRED).

**E) NON-CITIZEN LEGAL RESIDENT PAROLED INTO THE U.S.**

A Non-Citizen paroled into the U.S. is lawfully present in the U.S. as a result of a grant of parole by the Attorney General, pursuant to Section 212(d) (5) of the INA. This Non-Citizen is potentially eligible for services when the period of the parole is for at least one year. These applicants normally have one of the following USCIS documents (NOT ACCEPTABLE IF DOCUMENTS ARE EXPIRED):

1. I-94 - with PAROLE PURSUANT TO SECTION 212(d) (5) on the front. The form must not be expired and the expiration date must be at least one year after the issue date. Both dates are documented on the form. (Eligible for Benefits)

**F) NON-CITIZEN LEGAL RESIDENT WHOSE DEPORTATION IS WITHHELD**

A Non-Citizen Legal Resident whose deportation is withheld is a Non-Citizen Legal Resident for whom the Attorney General has withheld deportation from the U.S. pursuant to Section 243(h) or 241 (b)(3) of the INA. A Non-Citizen Legal Resident whose deportation is withheld is potentially eligible for services for a period of seven years from the date of the judge's orders.

These applicants normally have one of the following USCIS documents (NOT ACCEPTABLE IF DOCUMENTS ARE EXPIRED):

I-94 – with an order from an immigration Judge showing one of the following:

- Deportation withheld under 243(h) of the INA (Eligible for Benefits)
- Removal withheld under 241(b)(3) of the INA (Eligible for Benefits)

**G) CUBAN OR HAITIAN ENTRANT**

Cuban or Haitian entrants are admitted to the U.S. by USCIS as a Cuban or Haitian entrant pursuant to Section 501 (e) of the Refugee Education Assistance Act of 1980 (PL 104-93). Cuban or Haitian entrants are potentially eligible for benefits for a period of seven years from the date that their status is granted.

These applicants normally have the following USCIS document:  
(NOT ACCEPTABLE IF DOCUMENTS ARE EXPIRED)

1. I-94 with the words: CUBAN/HAITIAN ENTRANT UNDER 212(D) OF THE INA (Eligible for Benefits)

**(H) CONDITIONAL ENTRANT**

A conditional entrant was granted conditional entry into the U.S. before April 1, 1980, pursuant to Section 203 (a) (7) of the INA. Conditional entrants are potentially eligible for benefits regardless of any later change in their status.

These applicants normally have one of the following USCIS documents (NOT ACCEPTABLE IF DOCUMENTS ARE EXPIRED):

1. I-94 – with the words: ADMITTED AS A REFUGEE – CONDITIONAL ENTRY under Section 203(a) (7) of the INA. (Eligible for Benefits)

**I) ABUSED OR BATTERED NON-CITIZEN**

Documented Non-Citizens may become qualified Non-Citizens when they have suffered abuse from a parent or a spouse.

The agency staff must inform the Abused or Battered applicant of the following:

1. Applicant must contact the USCIS to obtain a Petition for Abused Aliens
2. The abuse must have occurred in the U.S. and the abusive person must be a U.S. Citizen or Lawful Permanent Resident
3. They must currently reside in the U.S.
4. They must provide any and all documentation verifying continuous residency in the U.S. for the prior five years

**NOTE:** All periods of time that are not accounted for must be addressed by an applicant statement.

- In order for the Non-Citizen to be eligible under this category, they must meet ALL of the following:

1. Possess appropriate USCIS status
2. Be battered or subject to extreme cruelty
3. Have a substantial connection between battery and the need for benefits
4. No longer residing with the batterer

**J) INDEFINITE DETAINEE**

Indefinite detention status pertains to Non-Citizens who have served their time for a criminal conviction and have been given formal orders to leave the U.S. Subsequently, Indefinite Detainee status is met when the Non-Citizen is allowed to indefinitely remain the U.S. because neither their home country, nor any other country will accept them.

An Indefinite Detainee applicant can be identified by an Order of Supervision (I-220B) USCIS form that should include the applicant's alien registration number and a notation regarding U.S. exclusion, deportation, or removal. Indefinite Detainee applicants may also have an Employment Authorization Document (I-688B) USCIS form showing 274a.12 (18). The agency should obtain as much of the following information as possible from the applicant:

1. Name and Date of Birth
2. Alien Registration Number
3. Social Security Number
4. Home Country
5. I-94 Card Number
6. Parent's Names
7. Driver's License Number
8. Copies of ANY immigration documents (I-220B, I-688B, etc.)
  - The agency should call the Office of Refugee Resettlement (ORR) to request an Indefinite Detainee eligibility determination and inform ORR that the collected information will be faxed.
  - The agency should fax the information collected from the applicant to ORR. The FAX must include the name, telephone number, and FAX number of the person requesting information.
  - The agency should document all action taken and the dates made.
  - The agency should not approve or disqualify the Non-Citizen Legal Resident during this period. The agency should hold the application pending detainee status confirmation from ORR.
  - ORR will submit the faxed information to USCIS and will notify the person requesting the information on the applicant's status and eligibility by FAX.

**K) MILITARY CONNECTION**

Non-Citizens who meet both of the following criteria are potentially eligible for benefits, regardless of their date of entry:

- a. They are a qualified Non-Citizen
- b. They meet one of the following military service criteria:
  1. An honorably discharged veteran or person on active duty
  2. On active duty in the Armed Forces of the U.S.
  3. A spouse of a veteran or person on active duty who meets one of the following:
    - Is legally married to the veteran or person on active duty
    - Is legally separated from the veteran or person on active duty
    - Is a widowed spouse of the veteran or person on active duty and has not remarried

**NOTE:** The applicant remains eligible regardless of whether they are living together or apart; the veteran or active duty person can be a U.S. Citizen or a Non-Citizen Legal Resident

When verifying military service criteria, the following apply:

01. An honorably discharged veteran of the Armed Forces of the U.S. must present an original or notarized copy of the veteran's discharge papers.
02. To verify the active duty status an original or notarized copy of the applicant's current orders or a military ID card (DD form 2 (active)) may be used.
03. Only full-time Air Force, Army, Navy, Marine, or Coast Guard is eligible. Any Reserve or National Guard duty is excluded.
04. A spouse or unwed dependent child of a veteran or active duty alien must provide a document to verify relationship along with military verification requirements.

**300. NON-CITIZEN ALIEN IDENTIFICATION CARDS**

This section identifies alien ID cards that applicants may provide to determine whether they meet one of the qualified non-citizen requirements to receive benefits. Documents cannot be EXPIRED.

.01 ALIEN IDENTIFICATION CARDS

The eligible ID cards listed in this section are as follows:

a. I-94 Arrival/Departure Record:

POTENTIALLY ELIGIBLE depending on the following:

1-94 admission stamp used, section of law/class-code annotations; Applicant must also meet a qualified Non-Citizen Legal Resident Status criteria identified in Section II-A. NOT ELIGIBLE for benefits when the document lacks a registration number.

b. I-94 Parole Edition:

POTENTIALLY ELIGIBLE depending on the following:

1-94 admission stamp used; section of law/class-code annotations; Applicant must also meet a qualified Non-Citizen Legal Resident Status criteria identified in Section II-A. NOT ELIGIBLE for benefits when the document lacks a registration number.

c. I-151 Alien Registration Card:

POTENTIALLY ELIGIBLE - The 1-151 is the original green card. Many however were printed on blue paper; several versions of this card exist.

Applicants must also meet qualified Non-Citizen Legal Resident Status criteria identified in Section II-A.

- d. I-551 Permanent Resident Card
- e. Visa Stamps in Foreign Passports – Eligible when all of the following occur:
  - The Visa is stamped “Processed for I-551, temporary Evidence of Lawful Admission for Permanent Residence”.
  - Neither the Visa NOR the passport have expired. The passport’s expiration date is normally found on the same page as the person’s photograph.

**NOTE:** Applicants, who have expired, lost or otherwise cannot locate their immigration documents from USCIS are responsible for contacting USCIS for replacement documents.

**NOTE:** Qualified Non-Citizen Legal Residents may have documents described as eligible; Case Managers must examine documents to establish their expiration date and cannot accept expired documents.

**400 AFFIDAVIT THAT DOCUMENT(S) IS/ARE TRUE**

**.01** An eligible applicant must execute a sworn affidavit (see Exhibit IV) stating that the documentation provided as listed on this document during the verification process is/are true.

- i. Contractors who determine eligibility for these programs will be required to ensure that a sworn affidavit is obtained in a way that does not delay the eligibility determination process, or add cost to the process for the applicant.
- ii. Eligible applicants are exempt from providing an affidavit only if they are 60 years of age or older, if they are Tribal Members, or if they are disabled or have an incapacity of the body or mind which makes them unable to supply such affirmation
- iii. Any contractor classified as a non-profit charitable organization must notify Department of Economic Security, Division of Aging and Adult Services (DES/DAAS), if “discovered violations” will not be reported to ICE, also
- iv. Contractors will establish their own process for reporting discovered violations to the Federal Department of Immigration and Customs Enforcement (ICE) and are advised to consult with legal counsel or ICE for further guidance.

**500 Determining Non-citizen Status**

To determine non-citizen status, complete the following:

Ask the applicant for their USCIS documentation. When the applicant states they do not have documentation, do not question the participant further regarding their non-citizen status.

When the document is provided, compare the document to the documents listed on pages 4 through 10. If the document is one of the qualified non-citizen documents, the non-citizen has a qualified status.

A nonqualified non-citizen, who is residing in the United States without the knowledge or permission of USCIS, may do one of the following:

- Voluntarily self declare that they are residing in the U.S. illegally or
- Provide Immigrations and Customs Enforcement (ICE) documents verifying violation of USCIS law.

When either of these occurs, follow your agency’s process for reporting discovered violations to the Federal Department of Immigration and Customs Enforcement (ICE).

#### **400. NON-QUALIFIED NON-CITIZENS**

Consider the following Non-Citizens as Non-Qualified. Documents include, but are not limited to the following:

1. 1-94 - Non-citizens with this document may have either qualified or nonqualified status. The admission stamp annotated on the card determines the non-citizen's status.
2. I-184-Crewman Landing Permit
3. I-185-Nonresident Alien Canadian Border Crossing Card
4. I-186 – Nonresident Mexican Border Crossing Card
5. I-444-Mexican Border Visitor Permit
6. I-586-Nonresident Alien Border Crossing Card
7. I-688A – Employment Authorization
8. I-688 -Temporary Resident this is the first card issued to non-citizens living in the U.S. under the Amnesty Program of the Immigration Reform and Control Act of 1986.
9. I-688B-Employment Authorization this is the second card issued to non-citizens under the Amnesty Program of the Immigration Reform and Control Act of 1986.
10. I-689 Fee Receipt-Non-citizens with this card may have either qualified or nonqualified status. The Provision of Law annotated on the card determines the non-citizen's status.
11. I-766-Employment Authorization
12. DSP150 Border Crossing Card-This card was introduced in 1997. Non-citizens with this card may have either qualified or nonqualified status. The Provision of Law annotated on the card determines the non-citizen's status.
13. Student Visa-This card was introduced in 1998

#### **500. INELIGIBLE ALIEN ID CARDS**

When an applicant provides one of the following alien ID cards they are INELIGIBLE for services and the applicant must provide another eligible document. All these forms expired before January 24, 1990.

- 1). Any alien ID cards that are expired.
- 2) 1-181a – Memorandum of creation of record of lawful permanent residence
- 3) 1-184 – Alien crewman landing permit and identification card
- 4) 1-185 – Non-resident alien Canadian border crossing card
- 5) 1-186 – Non-resident alien Mexican border crossing card
- 6) 1-444 – Mexican border visitor permit
- 7) 1-586 – Non-resident alien border crossing card
- 8) 1-688 – Employment authorization
- 9) 1-688A – Employment authorization document
- 10) 1-688B – Employment authorization document
- 11) 1-689 – Fee receipt
- 12) 1-766 – Employment authorization document
- 13) Non-resident border crossing card

**AFFIDAVIT THAT DOCUMENT(S) IS/ARE TRUE**

I, \_\_\_\_\_, swear or affirm, under penalty of perjury, that the document(s) presented by me to prove U.S. citizenship, U.S. national, or alien status are true.

*Printed or typed name*

DOCUMENT(S) PRESENTED:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*Signature of applicant*

\_\_\_\_\_  
*Date*

Equal Opportunity Employer/Program ♦ Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, and the Age Discrimination Act of 1975, the Department prohibits discrimination in admissions, programs, services, activities, or employment based on race, color, religion, sex, national origin, age, and disability. The Department must make a reasonable accommodation to allow a person with a disability to take part in a program, service or activity. For example, this means if necessary, the Department must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the Department will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be able to understand or take part in a program or activity because of your disability, please let us know of your disability needs in advance if at all possible. To request this document in alternative format or for further information about this policy, contact 602-542-3882; TTY/TDD Services: 7-1-1.

**AFIDÁVIT QUE EL/LOS DOCUMENTO(S) ES/SON AUTÉNTICO(S)**

Yo, \_\_\_\_\_ , bajo pena de perjurio, juro o confirmo que  
*Nombre en letra de molde o escrito por maquina*

el/los documento(s) que se me han presentado como comprobación de ciudadanía de los EE.UU., ciudadano de los EE.UU. o estatus migratorio son verdaderos y auténticos.

DOCUMENTO(S) PRESENTADO(S):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*Firma del solicitante*

\_\_\_\_\_  
*Fecha*

Empleador/Programa con Igualdad de Oportunidades ♦ Bajo los Títulos VI y VII de la Ley de Derechos Civiles del año 1964 (Título VI y VII) y la Ley de Estadounidenses con Incapacidades del año 1990 (Americans with Disabilities Act: ADA), Sección 504 de la Ley de Rehabilitación de 1973, y la Ley de Discriminación a Edad de 1975, el Departamento prohíbe discriminar en los programas, entradas, servicios, actividades o el empleo basado en raza, color de piel, religión, sexo, origen nacional, edad, e incapacidad. El Departamento tiene que hacer arreglos razonables para permitir a una persona con una incapacidad participar en un programa, servicio o actividad. Esto significa, por ejemplo, que si es necesario el Departamento debe proporcionar intérpretes de lenguaje en señas para personas sordas, un establecimiento accesible para sillas de ruedas, o materiales con letras grandes. También significa que el Departamento tomará cualquier otra medida razonable que le permita a usted entender y participar en un programa o una actividad, incluso efectuar cambios razonables en la actividad. Si usted cree que su incapacidad le impedirá entender o participar en un programa o actividad, por favor infórmenos lo antes posible qué necesita para acomodar su incapacidad. Para obtener este documento en otro formato u obtener información adicional sobre esta política, llame al 602-542-3882; Servicios de TTY/TDD: 7-1-1.