

**Highland County Job & Family Services
PREVENTION, RETENTION, AND CONTINGENCY (PRC) APPLICATION
COVID-19 DISASTER RESPONSE PROGRAM**

Low-income households may be potentially eligible for a one-time \$500 payment if you have a minor child and have had a loss/decrease in income or needs related to sheltering at home as a result of the COVID-19 pandemic. This program is limited to available funds. You must be a Highland County resident to apply. Applications can be emailed to highland-documents@jfs.ohio.gov or dropped off at Highland County JFS in the drop box located in the lobby.

Name:
Social Security Number:
Address/City/State/Zip:
Phone Number:
Email:

Complete the following for *EVERY* person living in your household, including *YOURSELF*.

Name	SSN	Date of birth	Relationship to Applicant	Source of Income	Monthly Income (Before Taxes)
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$

I attest that the following information is true and accurate (check all that apply):

- I live in Highland County.
- My household has experienced decreased income or has needs related to sheltering in place as a result of the COVID-19 pandemic.
- A minor child is living in the household.
- I pay child support for a minor child in Ohio.
- I am pregnant and my due date is: _____
- I am a US Citizen or qualified alien.
- No one in my household is currently disqualified from assistance programs.

I authorize this agency to make collateral contacts with other persons or organizations in order to verify my eligibility for this program.

Signature of Applicant	Date:
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HCJFS Worker Taking Application	Date:
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Voter Registration Notification: If you are not registered to vote where you live now, would you like to register to vote at this time? Yes No (If you do not check either box you will be considered to have decided not to register to vote at this time. This does NOT affect your application for benefits in any way.)