Mercer County Prevention, Retention and Contingency Program (PRC) Application Covid-19 Pandemic 2020

Name of Applicant: Phone # where you may be reached:				Prese	Present Address – street, city, zip			
Expla	in how	your household h	as been financially affe	ected by the C	ovid-19 pandemic:			
Utilit	y Comp	any name:			Account #:			
Have	you file	ed unemployment?	Yes or No) Date filed	l:				
If NO	(reasor	n why you have no	t filed):					
	(10001							
		Complete a	Ill sections below for ex *Include all anticipa		•		elf	
		Name	Relationship to Applicant	Date of Birth	1	Monthly Income	Source of Income	
1.			7,55					
2.								
3.								
4.								
5.								
6.								
Indica	ate if ar	ny of the following	statements apply to y	ou or anyone	in your household	:		
Yes	No							
0	0	Has an outstanding ADC, TANF, OWF or PRC IPV fraud balance anywhere in the United States?						
0	0	Is an alien not permitted for permanent residence?						
0	0	Is a fugitive felon or violating parole?						
- Mv si	- onatur	- e means that I hav	e answered all of the	 nuestions on	this application acc	 rurately and i	- in a truthful manne	
-	-		answered truthfully an	-	• •	-		
			iny assistance I receive				•	
unde	r this p	rogram to the acti	ual documented amou	nt of need. <u>L</u>	understand and agr	ee that MCJI	FS may contact other	
perso	ns or o	rganizations to ob	tain the necessary prod	of of my eligib	oility for this progra	m and the le	vel of assistance I a	
eligib	le for.							
Appli	cant Sig	nature			Date			

Parent/Guardian/Custodian Voter Registration Option: Are you registered to vote? **Yes or No** If you are not registered, do you wish to register? **Yes or No** If you wish to register, do you require assistance? **Yes or No**