



# COVID-19 Assistance File Checklist

Client Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Application Date: \_\_\_\_\_ Contact Date: \_\_\_\_\_ Due Date (5 days from contact): \_\_\_\_\_

- Obtain the appropriate documents for the application and upload into the applicant's folder in the One-Drive. Move the folder to the Pending Folder once completed in full.

Rec'd	Date
Y / N	_____ A. <u>Completed <b>Case Review Sheet</b></u>
Y / N	_____ B. <u>Completed <b>Human Services Assistance Application</b>. Use 2<sup>nd</sup> page only if 3+ HH members</u>
Y / N	_____ C. <u><b>Photo ID</b> for all HH members age 18+</u>
Y / N	_____ D. <u><b>Birth Certificates</b> for all children in HH (Shot Record, WIC card, or Student Info page w/ address from yourcharlotteschools.net Focus portal if cannot obtain BC)</u>
Y / N	_____ E. <u><b>Social Security Card</b> for ALL HH members. (Can provide IRS document with full SSN in lieu of)</u>
Y / N	_____ F. <u><b>Proof of all GROSS income</b> for past 30 days (wages, SS benefits, child support, UEI, pension, etc.) Wages for youth under 18 are not included, but unearned benefits (SS, TANF, etc.) are.</u>
Y / N	_____ G. <u><b>Zero Income Statements</b> for all HH members 18+ with no income in the past 30 days.</u>
Y / N	_____ H. <u>Current <b>Food Stamp Award Letter</b> listing all household members if receiving F.S.</u>
Y / N	_____ I. <u><b>Lease, W-9, and Prop. Appraiser printout for rent or Mortgage Statement and Prop. Appraiser</b></u>
Y / N	_____ J. <u>Copies of <b>bills</b> requesting assistance for</u>
Y / N	_____ K. <u><b>Proof of Crisis</b> due to COVID-19 (Paystubs showing previous hours, etc.)</u>
Y / N	_____ L. <u><b>Policies Signature Release</b> and <b>DEO Signature Release</b> Complete</u>
Y / N	_____ M. <u>Ensure all documents are uploaded in the applicant's folder in One Drive</u>
Y / N	_____ N. <u>Cut Client folder from your Assignments folder and Paste into the Pending file</u>