

# **Carrboro Family Financial Assistance Program**

## **Purpose**

Numerous families continue to face financial challenges resulting from the pandemic. These challenges pertain to securing necessities such as housing, utilities, childcare, and transportation. Carrboro households that are experiencing a financial hardship may be eligible for financial help.

## **Eligibility**

#### Applicants must:

- o Be a U.S. citizen or an eligible alien
- o Be a Carrboro resident
- O Income below 200% of Federal Poverty Level which provides income guidance for certain programs, benefits and reduced fees, poverty level or meets the Carrboro affordable housing goals & strategies document earning 60% of the area median income or less, spending no more than 30% of household income on housing costs, including utilities.
- Provide proof of need, for an unpaid bill(s) for childcare, rent, utilities, or transportation need.

### **Information**

Applications received by Orange County Department of Social Services from January 15 - 31, 2024.

#### Drop off completed applications to

Chapel Hill - Southern Human Services Center, 2501 Homestead Rd, Chapel Hill, NC 27516 Hillsborough - Hillsborough Commons, 113-B Mayo Street, Hillsborough, NC 27278 Or

#### Fax to 919-644-3005.

Include a copy of your identification and proof of need, for example an unpaid bill for childcare, rent, eviction order or transportation need with your application.

Staff will work with Orange County Department of Social Services and other agencies if necessary to confirm eligibility status of applicants in accordance with Federal, State, County and/or Town requirements.

Orange County Department of Social Services will also review application status for other programs potentially available and might contact you with the information.

# **Dispensing Funds**

The Town of Carrboro will send payment on behalf of applicant directly to the recipient such as the childcare provider or apartment complex, and not to the applicant. Funds will be dispensed until resources are depleted and/or application acceptance concluded.

Program Timeline				
ACTION	DATE			
Town Council approval	January 9, 2024			
Community announcement	By January 15, 2024			
Acceptance of applications and documentation	January 15-31, 2024			
Eligibility of applicants confirmed	By February 5, 2024			
Award funding and dispense payment	By February 19, 2024			
Provide final report to Racial Equity Commission	February 28, 2024			

For questions, contact Anita Jones-McNair, <u>amcnair@carrboronc.gov</u>, 919.918.7381 or Kannu Taylor, <u>ktaylor@carrboronc.gov</u>, 919.918.7351.

Note: Completing this application for the Family Financial Assistance Program does not automatically guarantee payment under this program.

# **Carrboro Family Financial Assistance Program Application**

Applicant Nam	Applicant Name:			Date of Application:			
Address:				Telephone:			
			<u></u>	Date Received and Time			
HOUSEHOLD: List all household members (Household members are required to provide last four digits of social security number and immigrant or citizenship status and race and ethnicity)							
Name	Date of Birth			Last four digits of your Social Security number	Citizen /Eligible Immigrant	Relationship	
		our application, a					
Applicant Statement: I understand that it is against the law for me to make false statements and that I am subject to prosecution if I do. I certify that the information I have provided is a true and complete statement of facts according to my best knowledge and belief. I certify under penalty and perjury, that all persons for whom I am applying are U.S. Citizens or qualifies immigrants. I declare under penalty of perjury (and being subject to prosecution under 28 U.S.C. § 1746) that the foregoing is true and correct.  Applicant's/Representative's Signature Date							
Tippineant of Itelpieventuri 10 organical Date							

The sections below should be completed by Orange County Department of Social Services and Town of Carrboro Employees Only

Orange County Department of Social Services staff completes this section –						
Family/household meet eligibility status? ☐ Yes ☐ No						
Reason denied:						
Orange County Den	artment of Social S	ervices staff Signature and Date				
Orange County Department of Social Services staff Signature and Date						
L						
Town of Carrboro staff complete	es this section —					
DISPOSITION: □ Approved	☐ Denied	☐ Pending				
Reason denied:						
	Town of C	Carrboro staff Signature and Date				