Indian and Northern Affairs Canada / Affaires indiennes et du Nord Canada

# APPLICATION FOR INCOME ASSISTANCE
# SDO1

**Please Print (Enter N/A where field is not applicable)**

## STEP 1: INFORMATION ON APPLICANT AND DEPENDENTS

| 001 Applicant last name: | 002 Applicant given name(s): | 003 Applicant treaty number: |
|---|---|---|
| Allan | Jessica | 023401 |

004 Applicant date of birth: month 11 day 22 year 1991 | 005 Applicant S.I.N. . . . . .

| 006 Spouse last name: | 007 Spouse given name(s): | 008 Spouse treaty number: |
|---|---|---|
| | | |

009 Spouse date of birth: month day year | 010 Spouse S.I.N.

**011 Dependent Children:**

| Last name | Given name(s) | Treaty number | Date of birth | S.I.N. |
|---|---|---|---|---|
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**012 Children Out of the Parental Home: (Please attach Children Out of the Parental Home Application and Authority)**

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**013 Disabled Adults: (Please attach medical assessment for disabled adult)**

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**014 Exceptions: (Please attach supporting documents)**

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## STEP 2: GENERAL INFORMATION

020 Check the appropriate box: Economic ☐ Social - Single Parent ☑ Social - Other ☐ Health ☐ ( WOP ☐ ASARET ☐ )

021 Have you received Income Assistance from any other source in the last six months? Yes ☐ No ☑

If yes, Start Date _____ End date_____ Municipality/Province/First Nation/Other Name_____

022 What type of residence do you occupy? CMHC housing ☐ Band Operated housing ☐ Private housing ☐

023 House number: 112 024 Street: River Road 025 Hydro account number: _____

026 Are you the household head? Yes ☐ No ☑

If no, complete Judah Owen 03201

027 Name of household head 028 Treaty number of household head

## STEP 3: DECLARATION OF ASSETS

029 Do you, your spouse or dependents have any assets to declare? Yes ☐ No ☑

If yes, please describe with value. Attach documentation if required (refer to section 3.7 of the regional manual).

_____

## STEP 4: DECLARATION OF INCOME

050 Did you, your spouse or dependents receive any income or financial assistance during the past 30 days? Yes ☐ No ☑

If yes, complete form SD03 - Declaration of Income

## STEP 5: APPLICANT ACKNOWLEDGEMENT

I hereby apply for assistance under the Social Development Program of the Department of Indian and Northern Affairs Canada. If eligible, I agree to inform the Issuing Authority immediately of any changes of address, marital status, family, financial, medical, and social conditions.

I the undersigned have no income to report for myself or my dependents except as declared for this period. I hereby authorize release of information concerning our circumstances, financial, medical or otherwise to the Issuing Authority and the Department of Indian and Northern Affairs Canada. This will specifically include information regarding claims and payments under Canada Pension Plan, Old Age Security, Employment Insurance Benefits, Income Assistance from other sources and other revenues as described on form SD03. I understand that legal actions may be taken against me for making false statements.

094 Signature of Applicant _____ 095 Date _____

096 Signature of Spouse _____ 097 Date _____

***For use by Issuing Authority***

200 Have you confirmed the recipient's residency? Yes ☐ No ☑

201 Was the income statement verified? Yes ☐ No ☑

203 Is the applicant eligible for Employment Insurance? Yes ☐ No ☑

204 Have you checked against registered membership? Yes ☐ No ☑

205 Is the applicant eligible to receive assistance? Yes ☐ No ☑

If yes, complete and attach form SD04-Budget and Decision Form

206 Briefly state the conditions for eligibility:

098 Signature of Issuing Authority _____ 099 Date 14-Apr-2011