



BOYS & GIRLS CLUBS

Welcome to the Boys & Girls Clubs of Southeast Georgia and the Elizabeth F. Correll Teen Center. The intent of this packet is to provide general information concerning the operations of the Elizabeth F. Correll Teen Center. Our staff will be glad to give you a tour, or answer any questions not discussed in this packet. We encourage and welcome your visits and comments.

Our goal is to have programs of excellence in Character & Leadership, Education & Career, Health & Career, Health & Life Skills, Arts & Music, Fitness & Recreation, Drug & Alcohol Prevention, and Environmental Awareness. It is also our goal to provide a safe and positive experience for our members. In order to achieve these goals we demand a united effort from staff, club members, club parents and guardians, the administration, and the surrounding community.

Hours of Operation during School Year

Monday - Thursday	3:30PM to 8:30PM
Friday	3:30PM to 11:00PM
Saturday	6:00PM to 11:00PM
Sunday	CLOSED

Hours of Operation during School Holidays

Monday - Thursday	7:30AM to 5:30PM
Friday	3:00PM to 11:00PM
Saturday	CLOSED
Sunday	CLOSED

CLOSINGS

MLK Birthday
Memorial Day
Independence Day
Labor Day

Thanksgiving and the Friday after.
Christmas Eve and Christmas Day.
New Year's Eve and New Year's Day

**Additional closings may be added. All closings will be posted a minimum of a week prior to closing. Exception includes but is not limited to inclement weather or unforeseeable issues or repairs.

Please join our Remind Text Group for updates on opening and closings.

LATE PICKUPS

Members are expected to leave club premises promptly at closing time. We ask that all members have prearranged transportation. Any member who remains after operating hours will be asked to wait for or meet parents off Teen Center premises. Teens remaining after hours will not be supervised by Teen Center staff.

MEMBERSHIP

Any teen enrolled in the 8th through 12th grades may become a member of the Elizabeth F. Correll Teen Center upon completion of membership packet and full payment of current monthly dues.

- * To attend the Elizabeth F. Correll Teen Center and participate in our activities, a teen must be a registered member and have student ID to enter and participate.
- * Monthly membership is \$20
- * Membership is paid monthly. A teen may join anytime during the month. Payment is not prorated during the month and must be paid in full at anytime during the month.
- * If a payment deadline should fall on a weekend or holiday, payment must be received no later than the last operating day prior to the month.
- * It is the responsibility of the member and/or member's parent or legal guardian to update registration forms as necessary throughout the year.
- * All new and returning members will be expected to fill out new registration forms every year between January 1st and January 31st.

DROP-IN/ VISITOR PASS

Visitors may have a one day pass to enter the club. A drop-in fee of \$5.00 is expected at the time of each visit. In an effort to ensure the safety of our teens, we require all teens show their school issued ID to enter the Teen Center. Same day school issued temporary IDs are welcome.

ATTENDANCE/HEALTH POLICIES

Any teen who has not attended school on a particular day will not be permitted to attend the club for the corresponding day. Teen Center Directors have the right to send home any member who has a fever over 100 degrees, is vomiting, has head lice, surfaced ringworm or any other symptom considered contagious.

LABELED PERSONAL ITEMS

We highly recommend that every personal item brought to Teen Center is labeled with the member's name and is not left unattended by member. The Teen Center and Teen Center staff will not be held responsible for any lost or stolen items, including but not limited to cell phones.

PERSONAL VEHICLES

Members with driver's licenses and personal vehicles may transport themselves to and from the Teen Center. It is assumed by staff that members transporting other members to and from the club have received permission from parent/legal guardians to transport participating members or transport other participating members.

All members entering and exiting Teen Center property are expected to follow the guidelines below:

- * Comply with all basic traffic laws
- * Maintain designated speed in parking lot
- * Music volume must be kept at a reasonable level
- * Vehicles may not be used as a "hanging out" venue

OPEN DOOR POLICY

The Elizabeth Correll Teen Center operates under an "Open Door Policy". Members are, at any time, allowed to leave the premises. Members are allowed to reenter the premises at any time after exiting the premises. The Boys & Girls Clubs of Southeast Georgia and the Elizabeth Correll Teen Center are not responsible for any member after he/she leaves club property.

The Teen Center Directors or standing authority has the right, at any time to ask a member to leave the club property, as outlined in the Elizabeth Correll Teen Center Discipline Policy. Teen Center Directors or standing authority has the right at any time to turn away a returning member if he/she feels that the member has engaged in inappropriate behavior while on or off club property.

No loitering is allowed in the Teen Center parking lot by either members or non-members. People loitering in the parking lot will be asked to leave the property.

The Teen Center and its surrounding property may not be used as a drop-off or pick-up for meeting point for non-members or members.

STUDENT DRESS CODE

Your attire and appearance can have an effect on the Teen Center environment. We hold safety and an appropriate attitude as a high priority at the Teen Center. Because of this we have modeled a dress code consistent with our public secondary school sites that we feel enhances the safety and standards for the Teen Center.

Teen attire and appearance that is disruptive to the positive recreational experience can be excluded from the Teen Center. Our Teen Advisory Group has put regulations in place that limit certain clothing. These include "gang" attire, clothing that promotes illegal products for minors and clothing that is "unduly revealing". If you are sent to the Teen Center's director's office for a dress code violation, you will be asked to change. Your parents

may also be called and asked to bring alternative clothing to the Teen Center. Multiple warnings may result in suspension.

Students are expected to be clean, neat and appropriately dressed at all times. A teen is expected to exercise good judgment in his/her choice of dress, making sure that it is appropriate for the Teen Center. Clothing must not be a distraction, immodest, inflammatory and/or offensive or pose a safety hazard. The final determination as to the appropriateness of any item will be made by Teen Center administration, but the following guidelines should be followed:

- * All items of clothing should be clean and appropriate for the Teen Center. They should not be too tight, improperly revealing, or allow undergarments to be seen.
- * Garments, jewelry, or articles of clothing should not display emblems related to alcohol, illegal or abusive substances, gangs, violence, sex or obscenities. Clothing must be free of words and symbols that are offensive or demeaning to others: (e.g. Dixie Outfitters).
- * Skirts and dresses worn at the Teen Center must be long enough to measure pinky to thumb from the knee. Splits in the skirts must also follow the finger rule. Running shorts, short shorts, tennis shorts, running tights should be an appropriate length or public. These shorts are for gym use only and change of clothes will be brought to wear to use in the rest of the Teen Center.
- * Teen Center Staff have final authority to ask teens to change attire they as much as they deem necessary

CODE OF CONDUCT

It is the intent of the Elizabeth F. Correll Teen Center staff to operate the Teen Center in a manner that will provide a safe, positive, and recreational experience for teen members while insuring the welfare and safety of all teens who attend. The Elizabeth F. Correll Teen Center Code of Conduct is intended to be used as a guideline in creating the environment for which teens are given the best opportunity to “reach their full potential as productive, caring, responsible citizens” as stated in the Boys & Girls Clubs of Southeast Georgia’s mission statement.

Teen Center Directors are responsible for the orderly operation of the Teen Center. In cases of disruptive, disorderly or dangerous conduct not covered in this code, the directors may undertake corrective measures which he or she believes to be in the best interest of the teens and the Teen Center.

Each staff member must comply with the rules and procedures set forth by Teen Center Directors. A report must be filed of any teen that has shown behavior that is in violation of the Student Behavior Code. This report shall be filed with a Teen Center Director or designee on the day the behavior happened. Each incident report will describe the violation and related disciplinary action.

- * Teen Center Directors or their designee will maintain a permanent file of the behavior violation reports mentioned above.
- * The degree of discipline will be in proportion to the severity of the behavior of a teen and will take into account the student’s discipline history, the age of the teen and other relevant factors
- * Before a teen is suspended, he/she may have the opportunity to explain their behavior. If the teen is suspended from attending, the parents will be notified; if possible.
- * Any behavior that violates any public laws or ordinances will be reported immediately to local law enforcement.

BEHAVIOR POLICY

All members and parent/legal guardians of members are required to read and sign the Elizabeth F. Correll Teen Center Behavior Policy and Code of Conduct. These guidelines are to be strictly adhered to.

GENERAL RULES

- * No running inside the building
- * No bouncing balls inside building outside of the gym
- * No PDA (Kissing, sitting in laps, etc)
- * Pants must be kept at waist (no sagging)
- * No bullying, verbal assault, threats of any kind
- * Absolutely NO FIGHTING, horseplay, etc
- * No food or drinks in lounge, at gaming stations or in gym
- * Be courteous and respectful to staff

DISCIPLINE PROCEDURES

- * The degree of discipline will be in proportion to the severity of the behavior of a teen and will take into account the student's discipline history, the age of the teen and other relevant factors.
- * The maximum punishments for an offense include-term suspension or expulsion from attending the Teen Center or permanent expulsion from attending the Teen Center.
- * Before a teen is suspended, he/she may have the opportunity to explain their behavior. If the teen is suspended from attending, the parents will be notified; if possible.
- * Any behavior that violates any public laws or ordinances will be reported immediately to local law enforcement.

The Teen Center's policy and its staff's responsibility are to operate the Teen Center with a "Zero Tolerance" approach to serious offenses. "Zero tolerance" is defined as immediate and permanent expulsion from attending the Teen Center. In cases that violate laws or ordinances will be reported immediately to local law enforcement.

INJURIES

Every precaution is taken to aid a member in avoiding an injury. All activities are supervised either by a staff member or a qualified adult volunteer. In case of a serious injury, parents/legal guardians will be contacted immediately. Should the parents/legal guardians of an injured member not be located, a staff member will accompany the youth to the hospital. A medical release statement, which is included in this application, will be used for treatment of the member. Minor injuries will be treated at the Teen Center by a staff member. It is the responsibility of the teen member to notify parent/legal guardian of injury if deemed necessary by the member.

MEDICATION/BUG SPRAY/ SUNSCREEN

No employee of the Elizabeth F. Correll Teen Center is allowed to administer, provide or apply medication, bug spray, and/or sunscreen.

SPECIAL ACTIVITIES

All guidelines set forth in the Elizabeth F. Correll Teen Center Behavior Code and Dress Code apply to any special events hosted by the Teen Center. Non-members may be allowed to participate in activities intended for the open community. These events will be designated as "community events". Additional costs may be applied to special activities and payments must be received in full prior to participation.

PARENTAL INVOLVEMENT

This Code of Conduct is based on the expectation that parents, guardians, teens, Elizabeth Correll Teen Center administration and staff will work together to improve teen behavior. The final determination will be discussed and decided by staff and/or administration.

Minor acts of misconduct will be communicated to parents at drop off/pick up and weekly phone calls from staff members.

SECURITY SERVICES

To provide for a safe, recreational atmosphere Teen Center Directors may choose to use security services at front desk check-in, including security officers, security cameras, metal detection devices, security fences, undercover officers or any other such security method or device considered necessary. Teens that enter the Teen Center are giving their consent for search and seizure of anything they bring in to the Teen Center.



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Teen Information

Student Last Name: _____ First Name: _____

MiddleName: _____ Date of Birth: _____

School: _____ Student Pin#: _____

Grade: _____ Gender (Circle One): Male Female

Home Address: _____

City/State/Zip: _____

Home Phone: _____ Teen Cell Phone: _____

DOES TEEN WANT TO RECEIVE REMIND TEXT UPDATES FROM THE TEEN CENTER? (CIRCLE ONE):

Yes No

LUNCH STATUS (CIRCLE ONE):

Free Lunch Reduced Lunch Paid Lunch

SPECIAL EDUCATION STATUS (CIRCLE ONE):

Yes- Special Education Student No- Not a Special Education Student

ETHNICITY (CIRCLE ONE):

White African American Hispanic Other

PRIMARY LANGUAGE (CIRCLE ONE):

English Spanish Other

LIVES WITH (CIRCLE ONE):

Both parents Single Parent Mother Single Parent Father Grandparent(s)

Foster Care Joint Custody Guardian Parent and Stepparent

Other: _____

Please explain in detail any special needs including allergies, medications, medical conditions/needs, diet, transportation issues, etc.:

PARENT(S)/GUARDIAN(S) INFORMATION:

1. Name: _____

Relationship: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

DOES PARENT/GUARDIAN WANT TO RECEIVE REMIND TEXT UPDATES? (CIRCLE ONE):

Yes

No

Email: _____

DOES PARENT/GUARDIAN WANT TO RECEIVE EMAIL NEWSLETTERS? (CIRCLE ONE):

Yes

No

2. Name: _____

Relationship: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

DOES PARENT/GUARDIAN WANT TO RECEIVE REMIND TEXT UPDATES? (CIRCLE ONE):

Yes

No

Email: _____

DOES PARENT/GUARDIAN WANT TO RECEIVE EMAIL NEWSLETTERS? (CIRCLE ONE):

Yes

No

EMERGENCY CONTACT (IF PARENTS CANNOT BE REACHED):

Name: _____ Phone Number: _____

Relationship: _____

Name: _____ Phone Number: _____

Relationship: _____



BOYS & GIRLS CLUBS

TEEN AGREEMENT

Last Name: _____ First Name: _____ Middle _____

****This form must be signed and completed before your teen is allowed to attend the Teen Center. Please initial in agreement beside each****

_____ I agree to participate in Teen Center programs and activities and I hereby give permission for the participant(s) listed on the top of the page to take part in the Teen Center's activities, which may include off-site events, academic assistance, continuing education and recreational programs

_____ If a medical emergency arises, program staff will take all steps necessary to ensure the safety of the participant and will call, if necessary, a public emergency vehicle for transport to an emergency facility. I understand that I will be responsible for any transportation charges and medical expenses incurred.

_____ I agree that if a health condition exists now or in the future which could impact the participation of the teen listed on the top of the page, I will notify the Teen Center staff.

_____ I hereby give my consent to the Teen Center program to take the participant's photograph during program activities to be used for educational and public relations purposes.

_____ I hereby give permission for my child's artwork, poetry or other work produce in conjunction with the the Teen Center's programs to be used for education and public relations purposes.

_____ I hereby give consent to the Boy & Girls Clubs of Southeast Georgia to view and copy my child's report card and progress reports. These reports will help my child's progress and help the staff at the clubs to better serve my child.

_____ I hereby certify that I have read and understand the above information. My teen and I have reviewed the rules and guidelines and accept the Elizabeth F. Correll Teen Center's dress code, behavior code, code of conduct and general rules.

Parent/ Guardian Signature _____ Date _____

Printed Name _____

Teen Signature _____ Date _____

Printed Name _____



BOYS & GIRLS CLUBS

ECTC CLIMBING WAIVER

RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND PARENTAL CONSENT AGREEMENT

I hereby release and discharge the Elizabeth F. Correll Teen Center, its employees, staff members, and appointed student leaders (paid or volunteer) from any claims, responsibilities or liabilities from injuries or harm incurred as a result of my participation and/or my child's participation in Rockwall activities at the Elizabeth F. Correll Teen Center.

1. I fully understand that : a) these activities involve risks and dangers of serious bodily injury, including permanent disability, paralysis, and death; b) these risks and dangers may be caused by my or my child's own actions or inactions or the action or inactions of others participating in the activity; c) there may be other risk unknown to me or not readily foreseeable at this time; and I FULLY ACCEPT ALL SUCH RISKS AND ALL RESPONSIBILITIES FOR LOSSES, COSTS, AND DAMAGES I or my child incurs as a result I of my participation or that of the minor in the activity.

2. I authorize the Elizabeth F. Correll Teen Center, its employees, staff members, and appointed student leaders (paid or volunteer) to take whatever action is necessary, in their best judgment, in an emergency and I hereby release them from any responsibility or liability related thereto.

I agree to follow all rules and procedure at the Elizabeth F. Correll Teen Center. This includes wearing and using required equipment correctly and safely. I agree to follow all instructions and directions given by Rockwall belayers and staff.

I give permission for my child to participate in Rockwall activities and agree to the release and waiver as stated above.

Participants Name: _____

Name of Participant Birth Date _____

Parent/Guardian Name _____ Phone Number Cell Phone _____

Emergency Contact Name and Phone Number (if parent/guardian is not available)

Participant Signature: _____ Date: _____



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FOOD SERVICE

The Boys & Girls Club of Southeast Georgia Inc. is participating in the CAFCP - Child & Adult Food Care Program. Meals will be provided to all eligible children free of charge. Children who are part of households that receive foods stamps, or benefits under the Food Distribution Program on Indian Reservations (FDPIR), or Temporary Assistance to Needy Families (TANF) are automatically eligible to receive free meals. Acceptance and participation requirements for the program and all activities are the same for all regardless of race, color, national origin, sex, age or disability, and there will be no discrimination in the course of the meal service. Attached is a list of sites with the start and end times of meal service for each site.

PARENTAL AUTHORIZATION FOR WATER-RELATED ACTIVITIES

I give permission for my child to participate in water related activities occurring in water more than two feet deep. Signature of Parent/

Guardian: _____ Date: _____

NOTICE OF EXEMPTION

I, _____ acknowledge that I have been informed that this program is not a licensed child care facility. I also understand this program is not required to be licensed by the Georgia Department of Early Care and Learning and this program is exempt from state licensure requirements.

Guardian: _____ Date: _____

HOLD HARMLESS AND LIABILITY RELEASE

Waiver Agreement (Checkmark OR Initial Required)

_____ I voluntarily submit my child for registration as a member at BGSEGA. I will hold harmless BGSEGA, GA Alliance and GA DHR from any claim by me or my child or any entity on behalf of myself or my child arising out of my child's participation in the program. I further state that I am of lawful age and legally competent to sign this agreement, and that my signing this agreement is my own free act. I also understand and agree that the terms herein are contractual, and they are not a mere recital or simply for information purposes. I have read, understand, and fully informed myself of the contents of this agreement. I assume responsibility for my child's physical condition and capability to perform under the program.



**Division of Family and Children Services
Community Programs Unit
Afterschool Care Program
Participation Eligibility Form**

Page 1 of 3 - DFCS Afterschool Care Program Eligibility Form

(DFCS funded Agency Name), and the Georgia Division of Family and Children Services (DFCS) are partnering to provide valuable out-of-school programs for youth in Georgia. The information provided on this form will help ensure that eligible youth are benefiting from the partnership. **Please complete this form in its entirety and return it to the identified staff person at the program site. We thank you for your cooperation.**

Form to be completed by Parent/Custodian/Caregiver

Youth Information – This section must be completed in its entirety.

Name of Youth Participant (Last) _____ (First) _____ (MI) _____

Social Security Number _____ - _____ - _____ Gender: _____ Male _____ Female

Date of Birth (mm/dd/yy): _____ / _____ / _____

Is the youth named above in Foster Care within the state of Georgia Yes No

Note: If the youth is in Foster Care but not in the care of Georgia, please provide the state name _____

Section 1

A. Is the youth applicant a U.S. citizen or qualified alien? Yes No

B. Is the youth applicant a Georgia resident? Yes No

C. Does the youth applicant fall into one (1) or more of the three categories below (Answer YES or NO and check all categories below that apply to the youth)?: Yes No

____ Youth applicant is between the age of 5 and 17 years old; **OR**

____ Youth applicant is 18 years old and currently enrolled in school (*high school, GED program or equivalent, or post secondary institution*) and will be enrolled in AND attend school during the upcoming academic year (*Verification of school enrollment includes a letter from the school on official school letterhead*): **OR**

____ Youth applicant is 18 - 19 years old and has a dependent child AND is the custodial parent

If one (1) or more answers to the questions in Section 1 is NO, the youth IS NOT eligible to participate in the DFCS funded services. If the answer to ALL of the questions in Section 1 is YES, please complete the remainder of the form.

Section 2

Does the youth currently receive benefits or services under any of the programs listed below (Please Note: you will have to provide official verification to the afterschool/summer program. See Appendix C for acceptable forms of verification):

		Yes	No
A.	Temporary Assistance for Needy Families (TANF)	<input type="checkbox"/>	<input type="checkbox"/>
B.	Supplemental Nutrition Assistance Program (SNAP) (<i>also known as Food Stamps</i>)	<input type="checkbox"/>	<input type="checkbox"/>
C.	Medicaid or Social Security Income (SSI)	<input type="checkbox"/>	<input type="checkbox"/>
D.	Reduced or free lunch program at school – <i>Note: This eligibility is only for single youth eligibility. This is not applicable if the entire school population is awarded free lunch in universal eligibility.</i>	<input type="checkbox"/>	<input type="checkbox"/>
E.	Peachcare for Kids	<input type="checkbox"/>	<input type="checkbox"/>

If the answer to at least one question in section 2 is YES, the youth is eligible to participate in the program and the parent/custodian/guardian may complete Section 5. Verification for receipt of services checked in Section 2 must be provided and a copy of the verification must be attached to this eligibility form. If the program does not receive verification of items checked in Section 2, the youth will not be able to participate in the program.

If the answer to ALL of the questions in Section 2 is NO, the parent/custodian/guardian MUST complete Section 3, Section 4 and Section 5 for eligibility determination. Verification for items listed in Section 3 and Section 4 must be provided and a copy of the verification must be attached to this eligibility form.

Page 2 of 3 – DFCS Afterschool Care Program Eligibility Form

If you answered NO to ALL of the questions in Section 2, please review the chart below and enter your family unit size, gross household yearly income and gross household monthly income to determine eligibility.

Family Income Eligibility for the DFCS Afterschool Care Program Income Eligibility Guide

Number of Persons in Family Unit	Federal Poverty Level *	DFCS Afterschool Care Program Annual Household Income Guidelines **	DFCS Afterschool Care Program Monthly Household Income Guidelines
1	\$12,140.00	\$36,420.00	\$3,035.00
2	\$16,460.00	\$49,380.00	\$4,115.00
3	\$20,780.00	\$62,340.00	\$5,195.00
4	\$25,100.00	\$75,300.00	\$6,275.00
5	\$29,420.00	\$88,260.00	\$7,355.00
6	\$33,740.00	\$101,320.00	\$8,443.00
7	\$38,060.00	\$114,180.00	\$9,515.00
8	\$42,380.00	\$127,140.00	\$10,595.00
Each additional person, add	\$4,320	\$12,960	\$1,080

* Income based on the Office of the Secretary, U.S. Department of Health and Human Services (HHS) 2018 Poverty Guidelines for the 48 Contiguous States and the District of Columbia. (Source: 83 FR , Page 2642-2644, Document Number: 2018-00814)

** 300 % of the federal poverty level released January 18, 2018.

Family Unit Size* _____

Gross Household Yearly Income \$ _____ Gross Household Monthly Income \$ _____

* See Appendix A for definition of family unit.

Please complete Section 4 by listing your name, the name of the child (ren) who live with you, and the other parent of the child (ren) if s/he lives with you. List any gross monthly income for each.

Household Composition and Income					
<i>Gross Monthly Income is income before taxes and deductions.</i>					
Name (First, Middle, and Last)	Relationship	Date of Birth (MM/DD/YY)	Income Source	Amount (Gross Monthly Income)	How often received?
	SELF				

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Page 3 of 3 - DFCS Afterschool Care Program Eligibility Form



Please review and sign Section 5 as notification and signature of verification.

Applicant Notification and Signature

We are asking for your youth's Social Security number because any person applying for or receiving federal benefits must give us his or her Social Security number. Federal law 409(a) (4) of the Social Security Act and federal regulations (45 CFR 264.10) allow us to collect this information.

By signing this application,

- I swear, under penalty of perjury, that to the best of my knowledge, all the information and statements I've provided in this application are true, and
- I promise to cooperate with any effort to verify the information provided.
- If selected to participate in the program, I promise to abide by all rules and guidelines.

Parent/Guardian/Caregiver Information – This section must be completed in its entirety.

Name of Parent/Guardian/Caregiver (Last, First, MI) _____
 Street Address _____ City _____ State _____ Zip Code _____
 Home Phone # _____ Work # _____ Cell# _____

 Parent/Caregiver/Guardian Printed Name Date

 Parent/Caregiver/Guardian Signature Date

Official Use Only Section for DFCS Funded Afterschool/Summer Service Provider:

Total Income: \$ _____ **Per:** Week Every 2 Weeks Twice monthly Monthly **Household Size:** _____
Annual Income Conversion: Weekly x 4.3333, Every 2 Weeks x 2.1666, Twice Monthly x 2, Monthly x 1
Total Converted Annual Income: \$ _____ (Round to the nearest whole number)

By signing below, I certify the information presented within this form was reviewed, verified and confirmed** and meets the DFCS Afterschool Care Program Eligibility rules and guidelines indicated within this form. I also certify this form will be kept in the youth participant's file in a confidential and secured location.

 Authorized Program Staff Signature Title Date

** See Appendix B for income verification proof sources

APPENDICES

***Appendix A: Family Unit**

The Department of Human Services Temporary Assistance for Needy Families (TANF) definition of family includes the dependent child for whom assistance is requested and certain other individuals living in the home with the child who are required to be included in the family.

The following individuals are considered members of the Family Unit:

- A biological or adoptive parent of the dependent child for whom assistance is requested;
- An eligible minor sibling, (whole, half or adoptive) of the dependent child for whom assistance is requested;
- Other children living in the home who are within the specified degree of relationship to the grantee relative but who are not members of the Family Unit; and
- A non-parent relative who is the caretaker if there is no parent in the home or if the only parent in the home receives SSI.

****Appendix B: Income Proof Sources and Applicable Income Sources**

Income verification must be obtained and a copy must be attached to the youth's income eligibility form.

Examples of earned income verification are:

- Pay stubs or receipts for the most recent four weeks of earnings;
- W-2 Forms;
- Employer's issued, signed and dated documentation;
- Personal income ledger or tablet (e.g. self-employed)
- Quarterly income tax returns;
- Annual income tax returns when presented in January – March quarter;
- Letter/statement from employer;
- Documentation from other DFCS staff such as the eligibility CM; and/or
- Form 809 or itemized statement completed by the employer.

Examples of unearned income verification are:

- Copy of current check with check stubs (within last 4 weeks);
- Award letters or written, signed and dated statement of payer;
- Social Security Records;
- Worker's compensation records;
- Form 139 – Contribution statement;
- Unemployment insurance claim records;
- Georgia Gateway screen information; and/or
- STARS.

See page 2 of Appendix B for applicable income sources.

Applicable Income

Each of the following sources of income is budgeted in determining eligibility:

Earned

- Wages or salary – Gross income of the applicant is used to determine eligibility
- Net Income from Self-Employment
- Employee commission
- Jury Duty
- Rental Income – (regular and ongoing payments – if engaged in management of property for an average of 20 hours or more per week)
- Roomer Income – (regular and ongoing payments)

Unearned

- Military Allotments
- Cash gifts Charitable gift exceeding \$300 received from and organization receiving state or federal funds
- Inheritances
- Insurance Benefits due to Loss of Income – benefits paid from an insurance policy due to loss of income
- Social Security Benefits
- Unemployment Compensation
- Worker's Compensation
- Alimony – (regular and ongoing payments)
- Child Support – (regular and ongoing payments)
- Farm Allotment – payments received from government-sponsored programs, such as Agricultural Stabilization and Conservation Services
- Veteran's Benefits
- Capital Gains
- Interest/Annuity
- Capital Gains/Dividends
- Pension
- Trust Fund
- Disability Payment
- Boarder Income – (regular and ongoing payments)
- Rental Income – (regular and ongoing payments - if engaged in management of property for an average of 20 hours or less per week)
- Deferred compensation through retirement plan

****Appendix C: Acceptable Verification of Benefits or Services**

- **Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), Medicaid, and PeachCare:** Official documentation showing the family/youth is currently receiving benefits at the time of application/enrollment into the afterschool care program (Integrated Eligibility System (IES) documentation, Official Letter from the Georgia Division of Family and Children Services outlining the receipt of benefits).
- **Supplemental Security Income (SSI):** Award letter from the Social Security Administration
- **Free or Reduced Lunch:** Award letter identifying free or reduced lunch as established by individual family eligibility. Note: Programs may receive a listing of students receiving free or reduced lunch granted the listing is on official school letterhead with the disclaimer that all free or reduced lunch eligibility is determined by individual family application. Universal, school-wide, city-wide or district-wide free lunch does not qualify as an acceptable point of eligibility for the DFCS Afterschool Care Program.