

Outreach Criteria Summary

Program Name/Description	Form of Proof
Acceptable	
SNAP (Food Stamps)	current date Notice of Action letter
SCHOOL LUNCH PROGRAMS ARE NOT ACCEPTED	current date, individual letter from the school
Children who meet the definition of homeless, runaway or migrant	The Homeless Coalition use their letterhead letter to confirm families homeless status after screening the parents
Federal Poverty Guidelines- Household's income is within the limits on the Federal Income Eligibility Guidelines	Previous or current IRS Tax Return
Section 8 low income housing	Section 8 voucher/ lease agreement/ rent receipt
Medicaid and other low income needs based health insurance programs including CHIP (children's health insurance program)	Annual Letter or card
SSI-Supplemental Security Income	Annual Statement
CALWORKS (JOBS) Job Opportunitites and Basic Skills (job training)	CalWORKS notice of action letter
Covered California/Medi-Cal	Medi-cal letter is sent to the families in December to show proof of health insurance for tax return

Not Accepted

Foster Children
 SSDI- Social Security Disability Insurance
 CalFresh
 School financial-need based program-Private/Parochial

*all forms for proof of qualification are to be collected and kept on file by the team administrator or head coach. If you have any questions regarding accepted forms of documents contact the Office Manager