

PRC
(Prevention, Retention, and Contingency Program)

WHAT IS THE PRC PROGRAM?

- PRC is a program that can assist in meeting an emergent need for families
- PRC is intended to meet an infrequent emergency that could not be avoided
- PRC is a program that helps families through a presenting crisis that interferes with retaining or obtaining employment
- PRC is to divert families from needing to apply for the Cash Assistance Program

WHAT KIND OF ASSISTANCE DOES PRC PROVIDE?

Help with:

- Delinquent rental payments with an eviction
- Utility disconnection
- Car repair for applicants who are employed or participating in the TANF/SNAP Employment & Training program
- Job related supportive services
- Repair or replacement of permissible appliances
- Short-term education or testing expenses
- Other – special circumstances

WHAT IS PRC NOT ABLE TO DO?

- PRC **does not** assist with medical bills
- PRC **does not** assist with mortgage payments
- PRC is **not** guaranteed

PRC Services are not intended to pay repetitive payments of the same crisis (i.e., continual utility disconnects or reoccurring eviction notices)

BASIC ELIGIBILITY REQUIREMENTS

- PRC is only available to households that contain at least one minor child or pregnant woman.
- A separate PRC application is required per emergency service requested.
- Applicant must be a Medina County resident.
- Household must meet financial and resource eligibility requirements
- Household must meet employment or disability criteria
- When requesting assistance with housing needs, agree to cooperate with MMHA and other community partners

In some cases, an agency panel will review the presenting need and determine the approval or denial of an application

REQUIRED VERIFICATIONS

SHELTER EMERGENCY

1. Copy of eviction notice or three-day notice to leave the premises; both must indicate the amount of rent that is delinquent
2. Landlord or property manager's name, address, and phone number

INCOME AND RESOURCE VERIFICATION

1. Document all earned and unearned income received during the previous 30-days
2. Provide all liquid resource documentation. Liquid resources are savings/checking accounts, stocks, bonds, CD's, etc.

UTILITIES

1. Provide copy of utility statement indicating "disconnection" or "shut-off"
2. Application for HEAP, when applicable
3. Enrollment in PIP (a PUCO regulated utility) with the gas or electric company is not mandatory, but highly suggested

CAR REPAIRS

1. Written estimate from a legitimate repair facility must specify the needed repair, parts, labor, VIN #, and total cost, less taxes
2. Car title or registration verifying ownership by applicant or lease agreement
3. Applicant must be employed or participating in a required OWF work activity and fulfilling their self-sufficiency contract
4. Auto repair must be completed by a certified ASE repair facility. Use of relative or self-repair will not be approved unless there is verification that the person is a certified ASE repair shop or is employed by a certified ASE facility
5. Applicant must provide a valid driver's license and proof of car insurance
6. Repairs cannot be completed prior to the PRC application being processed

Note: Agency reserves the right to require a second estimate

PROVIDER OF SERVICES

1. Provider of services, merchandise, repair must agree to accept a voucher from Medina County Job and Family Services

For agency use only: Case number: _____
Case Worker Assigned: _____ Date of application: _____

PREVENTION, RETENTION, CONTINGENCY APPLICATION

Name of Applicant: _____ Applicant's Social Security # _____

Address: _____ Phone Number: _____

_____ Email address: _____

Complete the chart below for all persons living with you, including yourself and any children (verification of all income is required)

Name	Relationship to applicant	Date of Birth	Social Security Number	Monthly Income & Source of Income
1.				
2.				
3.				
4.				
5.				

1. Explain what your need is/and estimate the amount you are requesting: _____
2. Explain why you cannot meet this need: _____
3. How do you intend to meet this need in the future? _____
4. Have you ever received any type of public assistance from a Department of Job and Family Services?
 YES or NO. If yes, list the county, type of assistance received, and dates received _____
5. Is anyone in your household presently under a sanction or disqualification from any job and family service program? YES NO If yes, give the name and date the sanction or disqualification began: _____
6. Has anyone in your household quit or refused a job in the last 90 days? YES NO If yes, give the individuals name and date of the quit or refusal: _____
7. Give the name of other agencies you may have contacted for assistance and the amount of the assistance, if applicable: _____
8. If you or any member of your family has any of the following resources, place a X in the box beside the applicable resource and indicate the current value of that resource. (**Verification of resource value is required**):

Resource	X	Name of Person with Resource	Amount
Cash on hand			
Savings account			
Checking account			
Stocks or bonds			
Other			

I understand PRC funds issued inappropriately or incorrectly, based on misrepresentation of facts or situation or misuse of these funds will result in a referral to the Benefit Recovery Unit for recoupment.

By signing this application, I understand and agree that Medina County Job and Family Services may contact other persons or organizations to obtain the necessary proof of my eligibility for PRC assistance.
 Applicant's Signature _____ Date _____

(For agency completion only)
Prevention, Retention, Contingency Worksheet

Date of application received: _____ 30-day budget period _____ to _____

PRC used in past 12 months: Y N Sanctions: Y N BRU: Y N

Amount of PRC funds available: \$ _____

List the items and/or services requested, and the amount needed:

Item or Service	Amount Needed

Reason for the need: _____

Income:

Source:	Amt. for budget period	Verification

Liquid resources less than \$2,000: Y N Verification provided: Y N

Total income for budget period: \$ 2999 Compare to 200% of FPL: \$ 3525

PRC Approval

Amount authorized \$ _____ Date of approval: _____

For the following need: _____

Vendor name & address: _____

Date notice mailed: _____

PRC Denied Date of denial: _____ Date Notice Sent: _____

Reason for denial: _____

Signature of worker: _____

Date: _____

Signatures of panel member(s): _____

Date: _____

Signature of supervisor: _____

Date: _____

Ohio Voter Registration and Information Update Form

WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.

Please read instructions carefully and type or print clearly using blue or black ink. Sections in red are required.

For questions, visit VoteOhio.gov or call 877-767-6446.

I AM: Registering as an Ohio voter Updating the address on my registration Updating the name on my registration

1 Are you a U.S. citizen? (required)

Yes No

Eligibility: To vote in Ohio you MUST meet all the following requirements:

1. You must be a citizen of the United States.
2. You must be at least 18 years old on or before the day of the general election.
3. You must be a resident of Ohio for at least 30 days immediately before the election in which you want to vote.
4. You are not incarcerated (in jail or in prison) for a felony conviction.
5. You have not been declared incompetent for voting purposes by a probate court.
6. You have not been permanently disenfranchised for violations of election laws.

2 Will you be at least 18 years of age on or before the next general election? (required)

Yes No

IF YOU ANSWERED NO TO EITHER QUESTION ONE OR QUESTION TWO, OR YOU DO NOT MEET ALL ELIGIBILITY REQUIREMENTS, DO NOT COMPLETE THIS FORM.

3 Name (required)

Last Name _____ Middle Name _____
First Name _____ Suffix (Jr, Sr, II, III, etc.) _____

4 Residential Address (required) - No P.O. Boxes. Enter new address if changed.

County _____
Address _____
City _____
Apt. or Lot # _____ ZIP Code _____

Residency Requirements: For voting purposes, your home address is the place you consider your permanent home. It is where you live and plan to return whenever you are away. If you do not have a fixed home but stay regularly at a shelter or another place, you can use that place as your residence for voting registration. If you have questions about your specific situation, contact your county board of elections.

5 Mailing Address (optional) - Use this field if your mailing address is different from your home address, including a P.O. Box.

6 Birthdate (required) - MM/DD/YYYY (not today's date)

7 Phone Number (recommended)

8 Identification (required)

If you have a current Ohio driver license or state ID card, you **MUST** provide that number (two letters followed by six numbers).

IF YOU DO NOT HAVE an Ohio driver license or state ID card, you must provide the last four digits of your Social Security number.

_____ I have not been issued an Ohio driver license, state ID card, or Social Security number.

9 Previous Address - Use this field if you are updating your address in your current registration.

Previous County _____

10 Change of Name - Use this field if you are updating your name in your current registration.

Former Legal Name _____ Former Signature _____

11 Signature (required) Please write your cursive, handwritten signature or make your legal mark, taking care that it does not touch the surrounding lines, so when it is digitally imaged by your county board of elections, it can effectively be used to identify your signature.

I declare under penalty of election falsification that I am a citizen of the United States, will have lived in this state for 30 days immediately preceding the next election, and will be at least 18 years of age at the time of the general election.

Today's date (required) - MM/DD/YYYY _____

FOR PERSONS ASSISTING AN APPLICANT

→ Assistance Attestation

I completed this form on behalf of the applicant due to disability, blindness, or illiteracy. I attest that the applicant indicated that he/she desired to register to vote or update the applicant's name or residence.

Printed Name of Assister _____

Signature of Assister for Applicant in Accordance with R.C. 3503.14 _____

Address of Assister _____

→ Compensation Attestation - I registered this applicant and am paid to do so by my employer.

Printed Name of Assister _____

Name of Employer _____

Signature of Assister for Applicant in Accordance with R.C. 3503.14(A) _____

Address of Assister _____

**TO ENSURE YOUR INFORMATION IS RECEIVED,
PLEASE DO THE FOLLOWING:**

1. Print this form.
2. Make sure all required fields are complete.
3. Sign and date your form.
4. Fold and insert your form into an envelope.
5. Mail your form to your county board of elections.

For your county board's address, please visit VoteOhio.gov/Boards.

If you have additional questions,
please call the office of the Ohio Secretary of State
at 877-SOS-OHIO (877-767-6446).

HOW TO OBTAIN AN OHIO ABSENTEE BALLOT

Any Ohio voter whose registration is up to date may cast an absentee ballot. Absentee ballot applications can be obtained from your county board of elections or from the Secretary of State online at VoteOhio.gov or by phone at 877-SOS-OHIO (877-767-6446).

OHIO VOTER IDENTIFICATION REQUIREMENTS

Voters must bring photo identification to the polls in order to verify identity. Voters who do not provide identification will still be able to cast a provisional ballot pursuant to R.C. 3505.181. For more information on voter identification requirements, please visit the Secretary of State's website at VoteOhio.gov or call 877-SOS-OHIO (877-767-6446).

Please note, if the applicant's driver license or ID contains a "NONCITIZEN" identifier (on the back), the identification requires additional proof of U.S. citizenship.

NOTICES

This form must be *received or postmarked* by the 30th day before an election in which you intend to vote. You will be notified by your county board of elections of your voting location. If you do not receive a notice following timely submission of this form, please contact your county board of elections.

Voter registration is subject to verification with state and federal databases.

Ohio Department of Job and Family Services
VOTER REGISTRATION
NOTICE OF RIGHTS AND DECLINATION

County Department of Job and Family Services
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Name	Date
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You have been provided with a voter registration application. Do you want to register to vote or update your current voter registration?

YES NO

IF YOU DO NOT CHECK EITHER BOX, YOU WILL BE CONSIDERED TO HAVE DECIDED NOT TO REGISTER TO VOTE AT THIS TIME.

Applying to register or declining to register to vote will not affect the amount of assistance that you will be provided by this agency.

If you would like help filling out the voter registration application form, we will help you. The decision whether to seek or accept help is yours. You may fill out the application form in private.

Signature

(This portion to be retained by agency)

-

(This portion to be given to applicant/recipient)

Date

If you believe that someone has interfered with your right to register or decline to register to vote, your right to privacy in deciding whether to register or in applying to register, or in applying to register to vote, you may file a complaint with the prosecuting attorney of your county or with the Secretary of State:

Ohio Secretary of State
200 Civic Center Drive
Columbus, Ohio 43215
(614) 466-2655

Name of County Prosecutor
Address of County Prosecutor
City, State and Zip Code of County Prosecutor
Phone Number of County Prosecutor

If you have not received any verification of your voter registration from the county board of elections in which you reside within 21 days from the date you registered, you may inquire about the status of your registration by contacting your county board of elections at this phone number: _____.