

**Application
Town of Amesbury
Youth Financial Assistance Program**

Please fill out all information on application. All information will be kept confidential and will be used only for the purpose of determining need. Should the combined annual income in your household be less than the 80% median income, you will qualify for assistance and may attend any summer program for ½ price. Maximum 1 program per child. **Please submit pay stub(s) for verification.**

Applicant's Name: _____ SS#: _____

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Address: _____ City: _____ State: _____ Zip: _____

Home #: _____ Work#: _____ E-mail: _____

Employer's Name _____ Tel.# _____

Fax _____ Address: _____

Income (Income must be reported for ALL household members over 18.) Total gross income: Includes income from all sources such as employment, investments, social security, child support and alimony, etc.

	Household member name <i>(list names of everyone living in the house)</i>	Age	Gross Annual Income (if over 18)	Source of Income
1				
2				
3				
4				

Income Detail:

___ Housing Assistance

___ Other (SSI)

----- TANF/TAFDC

___ TAFDC Recipient

___ Food stamps

___ Free Lunch ___ Reduced Lunch

If there are any extenuating circumstances that may be helpful in considering eligibility for a reduction, please describe below.

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INCOME GUIDELINES

Families assisted by the Amesbury Youth Financial Assistance Program must be income qualified. Upon review and calculation of your annual gross household income, our program will utilize the Boston MA-NH Median Family Income Limits to determine whether or not your family is below 80% of the median family income.

Household Size	(80%) median
1	\$45,500
2	\$52,000
3	\$58,500
4	\$65,000
5	\$70,200
6	\$74,400
7	\$80,600
8	\$85,800

Boston, MA-NH Area Median Family Income Limits Effective 2012

I certify all information in this application is true to the best of my knowledge and belief. I understand all information in this application is confidential.

We, hereby, authorize the Amesbury Youth Financial Assistance Program to request and receive verification of my income including employment, assets, social security, public assistance, pension benefits and for other income sources.

Signature(s)	Date

Please attach pay stub(s) to application

Send or drop off to address:

Amesbury Youth Services
5 School St./ 2nd floor
Amesbury, MA 01913