

APPLICATION WORKSHEET

NC FAST ID No.: _____ **Case Name:** _____

Start at Step 1 and work through Step 28. Do the steps in order. Do not round except where specified in instructions. Except for Line 3, if a negative number results after subtracting two numbers, insert a zero. Be sure to follow all "Note" instructions. When skipping lines or blocks, dash out or mark "NA."

CATEGORICALLY ELIGIBLE FOOD AND NUTRITION SERVICES UNITS (FNSU): Special rules apply to these FNSU's. Do not apply the gross income test to line 11 or the net income test to line 25. A one and two person FNSU will not be terminated if the allotment is less than \$1 but will receive the minimum allotment of \$16. A three or more person FNSU will be terminated if the allotment is less than \$1.

Self-Employment Income

NOTE: Include room and board payments.

	(Household Member)	(Source of Income)	(Gross Monthly Amount)
	_____	_____	\$ _____
	_____	_____	\$ _____
1.	Monthly gross self-employment income.		\$ _____
2.	Subtract monthly business costs.		\$ _____
3.	Net monthly income before taxes.		\$ _____

NOTE: If a self-employed farmer and line 3 is a negative amount (loss), enter the loss on line 10.

NOTE: If classed as "unearned income," carry forward to "Unearned Income" Section. Do not add to line 4.

Wages, Salaries, Or Other Income from Employment

NOTE: Do not count excluded income.

	_____	\$ _____
	_____	\$ _____
	_____	\$ _____
4.	Add line 3 and all wage and salary income.	

Educational Grants, Scholarships, Or Loans

	_____	\$ _____
	_____	\$ _____
5.	Enter monthly income received from educational grants, scholarships, or loans.	
6.	Enter monthly tuition and mandatory fees.	
7.	Subtract line 6 from line 5.	
8.	Add line 4 and line 7.	

Unearned Income

NOTE: Do not count excluded income.

	_____	\$ _____
	_____	\$ _____
9.	Add line 8 and monthly unearned income.	
10.	Enter farm loss from line 3.	
11.	Subtract line 10 from line 9.	
12.	If household meets the gross income limit, result is countable gross income.	
		\$ _____
13.	Multiply line 4 by 20%, and enter the result.	
		\$ _____
14.	Enter Standard Deduction.	
		\$ _____

NOTE: Except for FNSU's with an elderly or disabled member, if the amount on line 11 is more than the gross income limit, deny or terminate the case. If less than the limit, continue on to line 12.

Gross Limit(s) = \$ _____

Medical Expenses

NOTE: For elderly and disabled only. If there are no FNSU members authorized for this deduction, skip to line 17 and enter 0.

	Medical, Dental Services	\$ _____
	Hospital, Nursing Care	\$ _____
	Insurance, Medicare Payments	\$ _____
	Prescribed Drugs	\$ _____
	Dentures, Hearing Aids, Glasses	\$ _____
	Transportation Costs	\$ _____
	Attendant or Nurse	\$ _____
	Other (Specify)	\$ _____
15.	Total Medical Expenses	\$ _____
16.	Enter threshold amount.	\$ _____
17.	Subtract line 16 from line 15.	\$ _____
	Result is allowable medical expense.	\$ _____

- 18. Enter dependent care costs \$ _____ (13) _____
- 19. Enter legally obligated child support payments. \$ _____ (14) _____
- 20. Add lines 13, 14, 17, 18, 19, and enter total. \$ _____ (17) _____
- 21. Subtract line 20 from line 12. (18) _____
- Result is income after all deductions except shelter costs.** \$ _____ (19) _____

Shelter Costs

NOTE: Use the appropriate Utility Standard. Do not allow actual utility expenses except for fees charged by a utility company for initial installation of service, and installation and maintenance of wells and septic tanks.

- Rent or Mortgage \$ _____
- Tax and Insurance \$ _____
- Total Utility Standard \$ _____
 - Telephone (basic rate) \$ _____
 - Electric \$ _____
 - Gas \$ _____
 - Oil \$ _____
 - Water and Sewage \$ _____
 - Garbage and Trash \$ _____
 - Installation of Utilities \$ _____
 - Other (specify) \$ _____
- 22. Total Shelter Costs \$ _____
- 23. Divide line 21 by 2, and enter result. \$ _____
- 24. Subtract line 23 from line 22. \$ _____
- Result equals excess shelter costs \$ _____

(Excess Shelter Cost Limit = \$ 517 without a Specified FNSU member)

Net Monthly Income

NOTE: If the amount on line 25 is more than the Net Income Eligibility Limit, deny or terminate the case. If less than the limit, go to line 26 or skip to line 28 and enter allotment amount from the issuance table.

- 25. Subtract line 24 from line 21, but do not subtract more than the limit on shelter cost when applicable. Result here is net monthly income. \$ _____

Allotment Level

NOTE: If the FNSU contains 3 or more members and allotment on line 28 is zero or a negative number, deny or terminate the case.

- 26. Enter maximum allotment for FNSU size. _____
- 27. Multiply line 25 by 30% and enter result. (Round up - benefit reduction.) \$ _____
- 28. Subtract line 27 from line 26. If the FNSU contains 1 or 2 members and result is less than \$16, enter \$16. Result is monthly allotment. \$ _____

Workspace-Allotment Proration

NOTE: If using proration tables, leave this space blank.

NOTE: Prorated allotments of less than \$10 are not issued. The minimum \$16 allotment for 1 and 2 person FNSU's is also prorated.

- a. Enter day of month of application. Subtract from 31. Enter 30 if the date of application is the 31st of the month. _____
- b. Enter result of subtraction from line a. _____
- c. Multiply line b. by the full monthly allotment (line 28). Enter the product. _____
- d. Divide line c. by 30. Round down to drop cents. Result is prorated allotment. \$ _____

Eligibility Worker: _____
Date: _____

NOTE: Complete Client Record and Disposition block on application when applicable. Ensure appropriate notice is sent to the FNSU.