

CASH ASSISTANCE PROGRAM FOR IMMIGRANTS (CAPI) INDIGENCE EXCEPTION DETERMINATION

NAME OF APPLICANT/RECIPIENT		SOCIAL SECURITY NUMBER
NAME OF APPLICANT/RECIPIENT (SPOUSE)		SPOUSE'S SOCIAL SECURITY NUMBER
NAME OF SPONSOR	SPONSOR'S SOCIAL SECURITY NUMBER	NAME OF SPONSORED IMMIGRANT
NAME OF SPONSOR	SPONSOR'S SOCIAL SECURITY NUMBER	NAME OF SPONSORED IMMIGRANT

Living Arrangements

- Is NOT living with sponsor

 Living with sponsor
 Lives with others and pays for room and board

 Lives with others and receives Free room and board
 Lives Independently

Income

Total cash and in-kind contributions from sponsor(s)	\$
Total cash and in-kind contributions from others	\$
Total of recipient's/applicant's other income (including spouse's if living together)	\$
Total of income from all sources	\$
Federal SSI rate	\$

Resources

Sponsor(s)' resources available to applicant/recipient	\$
Applicant's/recipient's own resources (including spouse's if living together)	\$
Total resources available to applicant/recipient	\$
Federal SSI resource limit (\$2,000 for an individual, \$3,000 for a couple)	\$

Comments

Based on the information summarized on this form, it is determined that the indigence exception: (check one box)

does **does not** **apply to the applicant(s) recipient(s) named above.**

SUPERVISOR'S SIGNATURE	DATE	WORKER	DATE
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CAPI is a public assistance program funded by the State of California. If the indigence exception is being applied to the applicant/recipient named on this form, forward a copy of this form to:

Office of Program and Regulation Development
U.S. Citizenship and Immigration Services
20 Massachusetts Avenue NW
Washington, DC 20529-0001

AND

California Department of Social Services
Adult Programs Branch
744 P Street, M.S. 19-96
Sacramento, CA 95814-6413