

OFF
RESERVATION
ONLY



Emergency Assistance

The Community Services Block Grant Program assists low-income eligible American Indians with:



Food/Nutrition Assistance



Utility Assistance (including wood & propane)

Housing Assistance (off reservation only)



Employment and Education related costs



If you are of Native American heritage, and live in one of the following counties, you may be eligible for services through the CIMC/CSBG Program:

Alpine	Glenn	Mendocino	Sacramento	Tuolumne
Amador	Inyo	Merced	Shasta	Yolo
Butte	Kern	Modoc	Sierra	Yuba
Calaveras	Lake	Mono	Solano	
Colusa	Lassen	Nevada	Stanislaus	
El Dorado	Madera	Placer	Sutter	
Fresno	Mariposa	Plumas	Tehama	

Applications can be downloaded from our website at cimcinc.org and can be submitted by:

Email: CSBG@cimcinc.com

Fax: 1-916-564-2345

Mail: CIMC, Inc. CSBG, 738 North Market Blvd., Sacramento, CA 95834

For more information, call: 1-916-564-4053 Toll Free 1-800-432-2724 TTY 1-800-748-5259

All eligibility information is included on the application.

Note: Submitting an application does not guarantee approval.



California Indian Manpower Consortium, Inc.
Community Services Block Grant Program
 738 North Market Boulevard
 Sacramento, CA 95834

1- (916) 564-4053 (800) 432-2724
 Fax – 1-(916) 564-2345
 TTY – 1-(800) 748-5259
 Email – CSBG@cimcinc.com

CSBG APPLICATION

The CIMC CSBG Program provides assistance and budget management education to eligible low-income Native American families that live off-reservation in select counties in California.

Types of Assistance

Housing Assistance May reapply every 24 months	Utility Assistance May reapply every 12 months	Nutrition Assistance May reapply every 3 months	Supportive Service May reapply every 12 months
Will not be provided if you willfully failed to pay your rent, or if your household income is not sustainable and/or is not enough to pay future month's rent	Will not be provided if you willfully failed to pay your utility bill(s), or if you received assistance from another agency in the last 6 months.	Will not be provided if you did not return your receipts and gift cards from your last food assistance, or purchase non-allowable food items.	Will not be provided for non-core curriculum classes.

- Prevent eviction
- Relocation (This is a once in a lifetime service)

- Prevent disconnection
- Restore service
- Deposit
- Wood, propane, kerosene

- Employment
- Vocational Training
- Education

- Application and Money Management (mail original Application and Money Management so that original signature is on file)
- Indian certification
- Proof of residence/physical address
- All household income, including Cal-Fresh if applicable, for the past six months
- Additional Documents (as needed)
 - a. Intent-to-rent form (if applying for relocation assistance)
 - b. Pay-or-quit notice (if applying for eviction prevention assistance)
 - c. Disconnection notice (if applying for utility disconnection prevention assistance)
 - d. 12-month payment history from utility company
 - e. Background information for employment, vocational training, or education

STEP 2: Call 1- 916-564-4053 or 1-800-432-2724 to confirm that we received your application and supporting documents.

STEP 3: Receive eligibility decision. If you are eligible for CSBG services, we will let you know what services will be provided based on justification.

- ✓ Submission of an application does not guarantee that services will be provided.
- ✓ Documents are reviewed to verify information. Receipts may be requested.
- ✓ CSBG services may be denied if information provided is false, misleading, or withheld.

RELEASE OF INFORMATION AUTHORIZATION:

I certify by signing this sheet that I have read and understand the above information and hereby give the CIMC CSBG Program authorization to obtain any and all required information in order to complete my application process for assistance.

Applicant Name: _____ County _____

Applicant Signature: _____ Date _____

First Name Last	MI	<input type="checkbox"/> Male	Birthdate (month/day/year)	Telephone
Residence/Street Address Code	City	State	Zip	County
Mailing Address/P.O. Box Code	City	State	Zip	Reservation Resident? <input type="checkbox"/> yes <input type="checkbox"/> no Reservation:
Indian Certification: <input type="checkbox"/> BIA-Roll # _____ <input type="checkbox"/> Tribal - Roll # _____				Native American <input type="checkbox"/> Y <input type="checkbox"/> N Tribe: _____
<input type="checkbox"/> Birth Certificate <input type="checkbox"/> other _____				Check all that apply: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Single Parent <input type="checkbox"/> Two-Parent Household <input type="checkbox"/> Other Family Type

Highest Grade Completed _____ Do you have a: HS Diploma GED Degree Are you a student now? Y N

Enter the total number of people living the household including yourself in the box. Enter the total number of people who receive Any income in the box.

Enter the number of people in the household who are:

Ages: 0-5	Ages 24-44	Employed?	<input type="checkbox"/> Y <input type="checkbox"/> N If no last day worked:	If yes, hourly wage: hours worked per week
Ages 6-11	Ages 45-54	Food Stamps/WIC Commodities	<input type="checkbox"/> Y <input type="checkbox"/> N Date Received:	Monthly Amount:
Ages 12-17	Ages 55-69	Cash Aid/Tribal TANF	<input type="checkbox"/> Y <input type="checkbox"/> N Date Received:	Monthly Amount:
Ages 18-23	Ages 70 and Over	SSA/SSI	<input type="checkbox"/> Y <input type="checkbox"/> N Date Received:	Monthly Amount:

Monthly Expenses: (Please complete for the past month's expenses)
 Rent/ Mortgage: \$ _____ Electricity: \$ _____ Heating/Gas: \$ _____
 Groceries: \$ _____ Other: _____

Do you have Medical/Health Insurance? Y N
 Disabled Y N
 Veteran Y N

Household Income: List all family household income.

Name	Relationship	Source of income	Gross Monthly Income
_____	Self	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Are you related to anyone working for **CIMC** or to any member of **CIMC's** Board of Directors? Y N
 If yes, state name and relationship: _____

Have you applied for assistance through the **CIMC** Community Services Block Grant Program before? Y N
 If yes, list county and assistance: _____

Type of assistance requested, check all that apply.
 housing nutrition/food utility education employment other

STOP DO NOT FILL OUT INFORMATION BELOW. THIS SECTION IS FOR CIMC USE ONLY STOP

Monthly living Expenses	Income level Chart	Income for the past 6 months	Type of approved service/s																																																																																																					
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List all Adults in the Home (let staff know if additional space is needed)

Full Name Adults	Relationship	Birthday	Age	Enrolled in College/Vocational School <input type="checkbox"/> Y <input type="checkbox"/> N	If yes Grade/Years
				<input type="checkbox"/> Y <input type="checkbox"/> N	
				<input type="checkbox"/> Y <input type="checkbox"/> N	
				<input type="checkbox"/> Y <input type="checkbox"/> N	
				<input type="checkbox"/> Y <input type="checkbox"/> N	
				<input type="checkbox"/> Y <input type="checkbox"/> N	
				<input type="checkbox"/> Y <input type="checkbox"/> N	

List all Children in the Home (let staff know if additional space is needed)

Full Name of Child	Relationship	Birthday	Age	In School <input type="checkbox"/> Y <input type="checkbox"/> N If yes fill in grade	Grade
				<input type="checkbox"/> Y <input type="checkbox"/> N If yes fill in grade	
				<input type="checkbox"/> Y <input type="checkbox"/> N If yes fill in grade	
				<input type="checkbox"/> Y <input type="checkbox"/> N If yes fill in grade	
				<input type="checkbox"/> Y <input type="checkbox"/> N If yes fill in grade	
				<input type="checkbox"/> Y <input type="checkbox"/> N If yes fill in grade	
				<input type="checkbox"/> Y <input type="checkbox"/> N If yes fill in grade	
				<input type="checkbox"/> Y <input type="checkbox"/> N If yes fill in grade	

In the space below, write on detail what happened that caused your current emergency situation

I certify by signing this application that all information given is true and accurate to the best of my knowledge. i am aware that giving false/misleading information is considered perjury and may be subject to prosecution. i understand this application must be accompanied by verification of income, residency, and Indian ancestry. also by signing this application, i hereby give permission to the CIMC CSBG program to verify and obtain any information needed for the processing of this application.

Applicant Signature _____ Date _____

Assisted by Signature _____ Date _____

CSBG Eligibility Specialist _____ Date _____

CSBG Coordinator _____ Date _____

BUDGET MANAGEMENT EDUCATION

Do you often run out of money before the end of the month? Do you know where your money goes and how much goes to what expenses? Budgets are effective tools for managing your money and answering these questions. A simple budget determines how much money you have coming in, and how much money you have going out each month. Fill out the budget (BME) below:

Monthly Budget

NAME:	DATE:
1. Income	
Take-Home Pay	\$
Other Income	\$
Total Income	\$
2. Your Expenses	
Housing (Rent or Mortgage plus taxes, insurance, etc.)	\$
Car Payment	\$
Gasoline	\$
Auto Insurance	\$
Internet	\$
Cell Phone	\$
Cable TV	\$
Subscriptions (Netflix, Hulu, gym, newspaper, magazine, etc.)	\$
Groceries	\$
Medical & Dental (co-pays, prescriptions, etc.)	\$
Dining Out (restaurants, McDonalds, Dominos, snacks, etc.)	\$
Entertainment (movies, going out, gambling, etc.)	\$
Travel	\$
Utilities (heat, electricity, water, garbage, etc)	\$
Other Spending (hobbies, personal care, tobacco, ct.)	\$
Debt Payments (credit cards, student loans, loans, etc.)	\$
Savings	\$
Other	\$
Total Expenses	\$
3. Your Bottom Line	
Income Minus Expenses	\$

Budgets are also an effective way to determine needs vs wants. NEEDS are things that you must have to survive, like food or water, shelter and health resources. Although we want to have certain things like steak or the high end cable package, WANTS are things that you don't need.

Look at your budget is there any money left at the end of each month? Go back through it and put an N by those items that are NEEDS and a W by those that are WANTS.

Your list should look something like this:

Name:	Date:
Needs	Wants
Housing	Cell Phone
Car, Insurance, Gas	Cable
Groceries	Subscriptions
Utilities	Dining Out
Medical/Dental	Entertainment
Savings	Travel
	Other Spending

Total up the Needs on your Budget \$ _____

Total up the Wants on your Budget \$ _____

Review Want items and see if perhaps you can make a compromise. Needs cannot be substituted but there are option or choices for wants. Instead of having the full cable package can you save money each month by only having the basic cable package. Can you reduce your grocery bill by buying in bulk or using tap water instead of bottled water? Is there a cell phone plan that will lower your rate? Is it possible to get a roommate and save on your housing costs? How about bartering, do you have a skill or ability that you can trade for someone for services or products they have?

Make a list of items you can lower the costs of to have more money at the end of each month:

Most people usually have more month than money before payday and stretching a dollar is hard to do. There are several ways to address this and the envelope system is an easy method of budgeting that works well for most people.

Take envelopes and label them for each item on your budget, put the cash for that item in the envelope marked for that item, for instance, if your electricity bill is \$50 per month, mark an envelope Electrical Bill and when you get paid, put that amount in the envelope. Label the envelopes that pay for your

NEEDS first and then your WANTS second. For each envelope starting with the NEEDS, place the amount of money needed to pay for that item into the marked envelope. Make sure you put some money into a into a Savings envelope. After your NEEDS are done, label envelopes for your WANTS and fill them with the amount of money needed for that WANT. If you run out of money before filling all of the WANT envelopes, then you cannot afford to purchase that item or do that activity. If there is money left, this is the money that you can spend on anything you want.

If you have an envelope for electricity and have \$50 in it, but your friends want to go out. The entertainment envelope only has \$10, what should you do?

PAYDAY LENDING

By putting money into your savings envelope or bank account and letting it accumulate you save yourself from spending even more money when you have an emergency. Often people don't save and end up in an emergency situation where they take money for needs and spend them on the emergency. When people get into money troubles, they start looking for a quick fix until they get more money. There are lenders who offer quick money for a short term loan at high interest rates. These loans are called predatory loans because they are expecting you to keep borrowing from them. The predatory lenders refinance loans and collect fees without any real financial solution to help you.

Types of loans to avoid (predatory loans)

1. Payday Loan
2. Title Loan

Payday Loans are exactly what the name suggests, loans that last until your next payday. The average loan is \$350 and the term on these loans are typically 14 days, paydays are usually every two weeks. The supposed purpose is quick cash to take care of life's emergency situations. You borrow a few hundred bucks, pay a standard fee, and then repay the loan, right? Let's take a closer look behind the scenes and understand how these loans really work.

Example 1: Your car breaks down and it will cost \$100 to fix, you need your car fixed ASAP because you have to get to work. You have no savings and cannot get a loan from friends or family, and a bank will deny you because of credit history. Predatory Payday loans are across the street and promises a loan without a credit check in less than 30 minutes! The money will be deposited in your account tomorrow, your car will be fixed and everything is great.....right?

Payday loan fees are often expressed in \$100s, let's use \$10 for every \$100 borrowed. A two week payday loan for \$100 cost you \$10 in fees. This means that you owe them \$110 at the end of the loan (payday).

$$\$10/14 \text{ days} = \$0.71 \text{ per day}$$

$$\$0.71 \text{ per day for 365 days} = \$261$$

This equates to a 261% Annual Percentage Rate (APR)

What happens if you cannot pay the loan off at the end of the two weeks? The borrower will refinance the loan by paying the fee again extending the loan to another payday. Now you owe Predatory Payday Loans \$120 on the next payday. There are limits to how many times that you can rollover the loan. Once this limit is reached, then your account will go to collections. Once in collections, you may wind up having your wages garnished.

A payday loan report found that:

- 14% of borrowers can't afford to repay the loan.
- 76% of payday loans are renewals
- Average borrower is debt for 5 months
- 41% of borrowers need a cash infusion to pay off a payday loan

That brings us to Car Title Loans. These loans are usually for a longer period of time and for larger amounts. The average loan is \$950 and for a term of 30 days. These loans are backed by the value of the car that the borrower owns. Some car title lenders do not require a credit check or proof of employment. Just like payday loans, these loans include fees and are usually renewed several times.

Let's take a look at an example using a 25% interest rate.

Loan— \$950

$$\text{Interest} - \$950 \times 25\% = \$238$$

$$\text{Renewed 8 times} = \$238 \times 8 = \$1904$$

$$\text{Total interest on loan} = \$238 + \$1904 = \$2142$$

$$\text{Total paid back} = \$950 + \$2142 = \$3092$$

What happens if you cannot keep up with the payments? If you cannot pay the loan back the lender has the title to your car. They will repossess the car and sell it to settle your debt.

Although it is hard to make ends meet when you are in a low income bracket, paying close attention to your finances and saving money no matter how difficult it is will help you from paying even more money in the long term by not using quick cash alternatives.

For Housing

Have your potential landlord complete the following forms and return them to the CSBG Department

W9

Intent to Rent (for relocation only)

**If You Are Applying For Relocation Assistance,
Then Fill Out This Form.**



**California Indian Manpower Consortium, Inc.
Community Services Block Grant Program**

738 North Market Boulevard
Sacramento, CA 95834

916-564-4053 800-432-2724
TTY 800-748-5259 Fax 916-564-2345

INTENT-TO-RENT FORM

THIS FORM IS NOT A GUARANTEE OF EMERGENCY HOUSING ASSISTANCE. This form must be filled out by the Property Management Representative (PMR) or Landlord/Owner of rental property. If the PMR fills out this form, then a copy of authority to act on behalf of Landlord/Owner will be required. The information provided will be used to evaluate a client's request for emergency housing assistance.

LANDLORD INFORMATION

Name of Landlord: _____

Address of Landlord: _____

City, State, Zip Code: _____

Telephone Number: _____ Fax Number: _____

E-mail: _____

Payment will be made payable to: _____

RENTAL INFORMATION

Monthly Rent: \$ _____ Move-In Date: _____

Security Deposit: \$ _____ Total move-in costs: \$ _____

Name of renter(s): _____

Renter's new address: _____

City, State, Zip Code: _____

I certify that the information provided is correct and that this form serves as information of rental property that is potentially available for the above-named individual.

Signature of PMR or Landlord/Owner

Date