

Attestation of Eligibility for MI Food Assistance Program Work Requirement Deferral

This form tells the Michigan Department of Health and Human Services (MDHHS) the reasons you may be eligible for deferral or exemption from the work requirement for food assistance. MDHHS will ultimately determine if you meet the deferral requirements.

By signing below, I _____ attest that the checked box(es) accurately reflects my current situation.

If any of the following circumstances apply to you, you may qualify for a deferral from Time-Limited Food Assistance (TLFA) work requirements. Check all that apply and briefly describe your situation.

- I am incapacitated (unable to work) due to injury, disability, physical, or mental illness or condition.

- There is a child under 14 in my food assistance group.

- I am responsible for the care of a child under 6.

- I am responsible for the care of a disabled person.

- I am applying for or receiving unemployment benefits.

- I am currently pregnant.

- I am applying for or receiving public or private disability benefits. Check all that apply:
 - Veterans' disability benefits
 - Workers' compensation
 - SSI application, approval, or appeal
 - MI Rehab Services Program
 - State-issued temporary or permanent disability benefits
 - Social Security Disability benefits
 - Other disability benefit, describe

- I struggle with drug/alcohol addiction or am an active participant in a drug or alcohol addiction program.

- I am mentally or physically unfit to work because I am unhoused/homeless (See 7 CFR 273.24(c)(7)).

- I am Native American (tribal member, Urban Indian, or California Indian).

- I am a victim of domestic violence.

- I am participating in a refugee resettlement program with a local refugee contractor.

- I am an individual subject to and complying with Family Independence Program (TANF or cash assistance) work requirements.

- I am a student enrolled at least half-time in a recognized school, training program, or institution of higher education. (*Some restrictions apply, review instructions.*)

If you do not qualify for a deferral, you can still receive food assistance by meeting work requirements in one of the following ways. Check all that apply.

- I work 80 hours monthly and I am paid for my work.
- I receive monthly average earnings of at least 20 hours/week multiplied by the federal minimum wage.
- I work 80 hours monthly and I am paid with goods or services (in kind) rather than in money.
- I work 80 hours monthly and am not paid for my work.
- I am participating in self-initiated community service.
- I am participating in Michigan Works training.
- I am not yet participating in self-initiated community service or Michigan Works training, but please give me information and assist me in participating so that I may satisfy work requirements.

Signature: _____

Printed name: _____

Date: _____

Phone number: _____

Email address: _____

MI Bridges Case Number, if available: _____