South Central Community Action Program
SCCAP
Empowering people to reach their potential

Did you lose employment or income due to COVID-19 anytime from March 6, 2020 - March 31, 2021? If so, you MIGHT qualify for an additional $350 benefit from CARES Act funding. (If your household already received this funding either during the 2019-2020 or 2020-2021 Energy Assistance Program, you aren't eligible to receive it a second time.)

If you lost your job completely or had a reduction of hours, have your employer complete this section: (If you have applied for Unemployment, provide proof of that too.)

Date of job loss or when reduction in hours or income began: _____

Employer_____

Gross pay per pay period prior to COVID _____ Gross pay after _____

Average hours per pay period prior to loss/reduction _____ Avg hours after _____

HR/Manager/Supervisor name and title _____/_____

Signature _____ Date _____

Phone _____ Email _____

If you are self-employed:

Please provide a written and signed statement on business letterhead explaining the nature of your business and the reason and dates for your loss of income. If you do not have letterhead, provide a written statement signed by you. Attach the statement to this form and submit to SCCAP. If you have applied for Unemployment, provide proof of that as well.

If you had a reduction of hours worked due to the need to stay home with children and/or to help school-aged children with e-learning, or due to being sick with or caring for someone who was sick with COVID:

Provide a series of pay stubs from **before** the pandemic to show what you used to earn, and provide a series showing a loss of income directly related to the pandemic, along with a note explaining the dates and the reason for the loss of income. Include this form when submitting.

If you are eligible for the additional benefit, please indicate below how you would like it to be applied:

_____ $350 to electric   _____ $350 to heating   _____ Split evenly between heat/electric

Applicant signature _____ Date _____

Printed name _____

PLEASE SUBMIT FORM AND SUPPORTING DOCUMENTATION BY MAY 14, 2021