



ELIGIBILITY DETERMINATION FORM

Name: _____ Today's Date: _____
 SS#: _____ Telephone: _____
 Street Address: _____ Email: _____
 City/Zip Code: _____ Marital Status: _____
 D.O.B: _____ Sex: M F Race: _____

ARE CHILDREN IN THE STATE OF FLORIDA? YES (REQUIRED) NO (NOT eligible)

Case Docket #: _____ PA Case #: _____ Amount \$ _____

Custodial Parent Name: _____ Social Security Number/DOB _____

Name of Child (ren): _____ Social Security Number/DOB _____

1. _____
2. _____
3. _____

Any other child support Cases? YES NO

Check all eligibility requirements that apply.

- The Non-Custodial Parent is:
1. Court ordered into NCEP Program
 2. Having difficulty paying child support
 3. Unemployed
 4. Under-employed

- The Minor Children Are:
1. Eligible under TANF income guidelines
 2. Eligible for/or receiving:
 - A. Food Stamps
 - B. SSI
 - C. Medicaid/Ins.

The Non-Custodial Parent has:

Valid Driver's License: YES NO
Steady Transportation: YES NO
Resume: YES NO
HS/GED: YES NO
Highest Grade Completed: _____
In School/Training Program: YES NO
Type: _____
Work Experience: _____

Legal Background: _____

The Non-Custodial Parent must enter into a Personal Responsibility Contract with NCPEP under which they commit to actively participate in services that will increase their employment and earning to support their children.

Non-Custodial Parent Signature _____

Print Staff Name & Agency Referring (if applicable) _____

PLEASE FAX COMPLETED FORMS TO:

Hillsborough: 813-930-7812	Pasco: 727-484-3388	Pinellas: 727-328-3399	Miami-Dade: 305-349-1323
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