



NONCITIZEN, SPONSORSHIP, & CALFRESH



LEARNING OBJECTIVES

1. Be able to identify which noncitizens are potentially eligible for CalFresh.
2. Be able to understand and explain to your clients what are the options for non-citizens when applying for CalFresh.
3. Be able to provide your clients with information regarding some of the myths around receiving public benefits.



WHO QUALIFIES

Definitions and Federal vs State
Rules

QUALIFIED NONCITIZENS

- Legal Permanent Resident
- Refugee
- Asylee
- A non-citizen who had deportation withheld
- A Cuban or Haitian entrant
- A conditional entrant
- A parolee for at least one year
- Under certain circumstances, a battered spouse, a battered child, a parent of a battered child, a child of a battered parent with a petition pending
- Victims of human trafficking and other serious crimes

FEDERAL CALFRESH CRITERIA

- Be a qualified noncitizen and be under 18 years of age; or
- Have been in a qualified immigrant status for 5 years or more; or
- Were granted refugee, asylum, withholding of deportation, Cuban/Haitian entrant, Amerasians immigrant, Iraqi or Afghan special immigrant status; or
- Credited with 40 qualifying work credits; or
- Are receiving disability-related assistance; or
- Were 65 years old or older & were lawfully residing in the US on August 22, 1996;
or
- Veteran, active duty military, their spouse and children

STATE CRITERIA- CFAP

- Includes qualified noncitizens who entered the US on or after August 22, 1996 who are ineligible for CalFresh SOLELY due to their immigration status
 - Example: this mainly refers to Legal Permanent Residents who have been in the US for fewer than 5 years
 - Victim of trafficking, applicant for U visa, or U visa holder

The clients will not know the difference, they still receive the same EBT card and the same CalFresh benefits, the main difference is the funding source.

UNDOCUMENTED & MIXED STATUS HOUSEHOLDS

- Undocumented individuals do not qualify for CalFresh
- However, other legal household members may still qualify
- Receiving benefits for eligible household members will not affect immigration status or future applications for immigration status change
- Must report income, which will be pro-rated

- *Each case is unique - contact Legal Aid for assistance*
(877) 534-2524
(877-LEGAL-AID)

PROCESS TO BECOMING AN LPR

Green card can be attained through

- Family
- Job
- Refugee or Asylee Status
- Diversity Immigrant Visa Program/“Green Card Lottery”
 - and so many more options



PROCESS EXAMPLE: US CITIZEN PETITION FOR AN IMMEDIATE RELATIVE

1. Filling out the petition form and paying the \$420 filing fee
2. Complete a biometric interview
3. Interview with USCIS. USCIS will send information to the US Department of State's National Visa Center.
4. When a visa is available, the US Department of State's National Visa Center will invite the qualifying immediate relative to apply for immigrant visas
5. When the immediate relative is able to immigrate to the US, the petitioner or a joint sponsor must agree to become the relative's financial sponsor.



SPONSORSHIP

Rules and the Application
Process

TERMS TO KNOW

Term	Definition
Sponsor	When non-citizens enter the US, they often have a person or group who complete an Affidavit of Support
Affidavit of Support	A legal document sponsors sign stating they will be financially responsible for the noncitizen until that person either becomes a US citizen or can be credited with 40 quarters of work (usually 10 years).
Deeming	The income of the sponsor is added to the income of non-citizen applying for benefits
Indigent	For the purposes of CalFresh, this term refers to a non-citizen who is unable to obtain shelter and/or food and would go homeless or hungry without county assistance. They must fall under the 130% FPL.
Public Charge	For the purposes of determining immigration eligibility, this term refers to individuals who are likely to become primarily dependent on the government for subsidies. Applying for & receiving CalFresh is NOT considered a public charge.

OVERVIEW OF THE PATHS CLIENTS CAN TAKE TO RECEIVE CALFRESH

1. The client is exempt from sponsor deeming and applies normally.
2. The client falls under the sponsor deeming category and shares his/her sponsor's financial information.
3. The client qualifies as indigent and does not need to provide the sponsor's financial information. The client still needs to provide the sponsor's name.
4. The client has the option of opting out and only applying for the other household members.

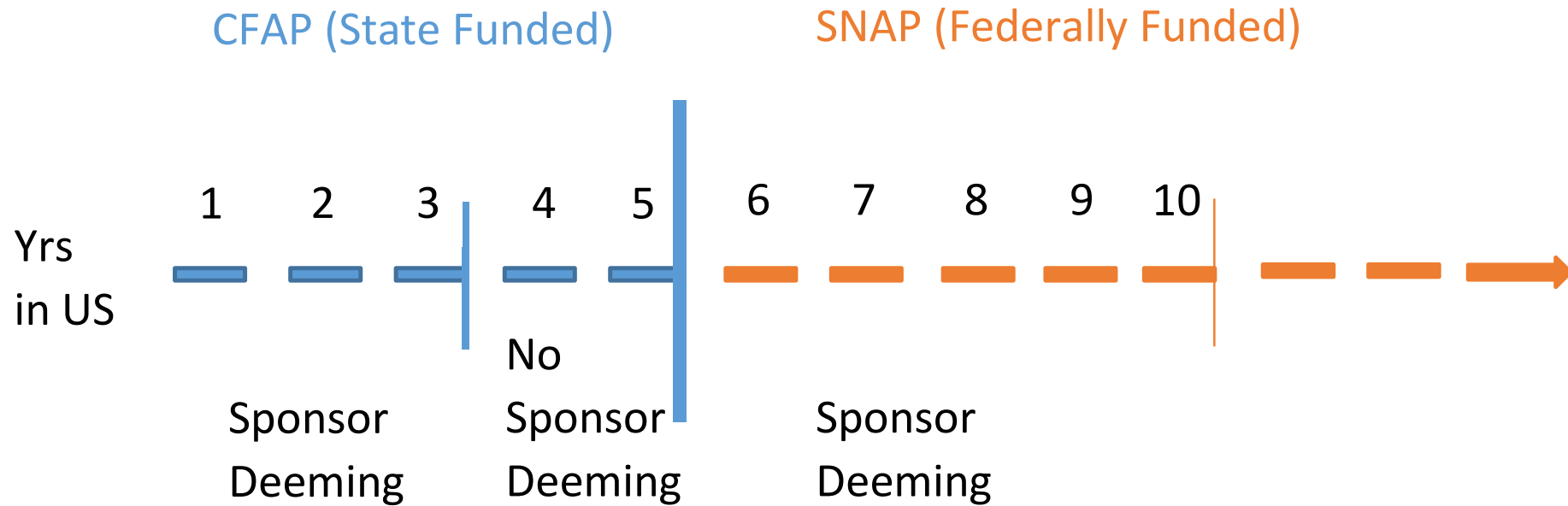
1. THE CLIENT IS EXEMPT FROM SPONSOR DEEMING

The client is exempt from sharing the sponsor's financial information if:

- The client was sponsored prior to December 19, 1997; or
- The client is a victim of human trafficking, domestic violence, or other serious crime. This exemption last for 12 months; or
- The client is part of the same CalFresh household as the sponsor; or
- The person was sponsored by an organization or group. This includes: refugees, asylees, people granted withholding of deportation, Amerasians, and Cuban or Haitian entrants; or
- The client has 40 qualifying work quarters; or
- The client is under 18 years of age; or
- The client declares themselves indigent*

FEDERAL RULES VS STATE RULES

Sponsor Deeming Timeline:



2. CLIENT HAS TO DEEM THEIR SPONSOR

- Form SAR22: Sponsor's Statement of Facts- Income and Resources
- Must be completed by the sponsor at the initial application, during SAR7, and at recertification
- If necessary, the HSSA staff must assist the noncitizen in obtaining the information

SPONSOR'S STATEMENT OF FACTS INCOME AND RESOURCES

(Supplemental Application For Food Stamps And Cash Aid)

INSTRUCTIONS: PLEASE ANSWER THE FOLLOWING QUESTIONS FOR YOURSELF AND YOUR SPOUSE (IF LIVING TOGETHER OR IF SPOUSE HAS SIGNED AN AFFIDAVIT OF SUPPORT) AND RETURN IT TO THE NONCITIZEN IMMEDIATELY.

Noncitizen Name and Address

Proof may be needed to verify answers to the following questions. Attach proof when the form asks for it.

① YOUR NAME (FIRST, MIDDLE, LAST) TELEPHONE NUMBER ()

HOME ADDRESS (NUMBER, STREET, CITY, STATE, ZIP CODE)

MAILING ADDRESS (IF DIFFERENT THAN HOME ADDRESS)

② YOUR SPOUSE'S NAME (IF LIVING TOGETHER OR SIGNED AN AFFIDAVIT OF SUPPORT) (FIRST, MIDDLE, LAST) HAS SPONSOR'S SPOUSE SIGNED AN AFFIDAVIT OF SUPPORT? Yes No

③ Do you or your spouse get assistance such as: California Work Opportunity and Responsibility to Kids (CalWORKs), Food Stamps, or Supplemental Security Income (SSI)? If Yes, complete below: Yes No

Case Name	Date of Birth	Type of Assistance	County	State

If both you and your spouse get Assistance and the noncitizen is not applying for Food Stamps, complete only the Certification section on Page 3 and return the form. For all others, go to Question ④.

④ A. Have you or your spouse sponsored any other noncitizen's entry into the United States? If Yes, complete below using the I-864, I-864A, or the I-134: Yes No

Noncitizen Name	Noncitizen Address	Date of Admission to U.S.

B. Are any of the noncitizens listed in ④A receiving any type of assistance such as: CalWORKs, Food Stamps or SSI? If Yes, complete below: Yes No

Type of Assistance	Date First Applied	County	State

⑤ Do you or your spouse have other persons who are claimed or could be claimed as dependents for federal income tax purposes? If Yes, complete below: Yes No

Name of Person(s)	Does Person Live With Sponsor?
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Yes <input type="checkbox"/> No

COUNTY USE ONLY
CASE NAME: _____
CASE NO: _____
WORKER NO: _____

VERIFIED:
 Letter on File
 Verbal Communication
 Other: _____

VERIFIED:
 Affidavit of Support on File
 I-864
 I-864A
 I-134
 Other: _____

Verified
 Verified
 IRS Form 1040 Reviewed
 Other: _____

Claimed Yes No
Claimed Yes No
Claimed Yes No
Claimed Yes No
Claimed Yes No

HOW TO DETERMINE THE SPONSOR'S INCOME AVAILABLE TO THE NONCITIZEN

1. Add the total monthly earned and unearned income of the sponsor and the sponsor's spouse (if the spouse also signed the Affidavit of Support)
2. Deduct 20% from the earned income portion
3. Deduct the CalFresh monthly gross income eligibility limit for a household size equal to the sponsor's household (include sponsor, sponsor's spouse, and their dependents)
4. The remaining amount is the income deemed available to the sponsored household.

Calculations	Description
\$2,700	Sponsor's monthly earned income
$\$2,700 - 540 = \$2,160$	Subtract 20%
$\$2,160 + 800 = \$2,960$	Add sponsor's unearned income
$\$2,960 - \$2,622 = 338$	Subtract gross monthly income for a household size equal to the sponsors (i.e. 2 person HH)
\$338	Income deemed available for sponsored noncitizen

3. CLIENT QUALIFIES AS INDIGENT, NO SPONSOR DEEMING

A client will qualify as “indigent” if their gross income, including any and all financial (or in kind) support from their sponsor or others is at or below 130% FPL.

- The determination of indigence remains in effect for 12 months from the date of eligibility.
- No limits on the number of times a client can be deemed to be indigent
- **HSA staff should screen applicants** for indigency but clients can also self-declare
- If the client is not receiving financial support from their sponsor, they do not need to provide proof. A sworn statement from the client is all that is needed.

IMPORTANT THINGS TO KNOW

- The worker should screen the client to see if they qualify under the indigency exemption
- The worker should assist the client in obtaining verifications
- **The worker will inform the sponsored noncitizen, either verbally or in writing at the time they are determined indigent, that their name and their sponsor's name will be reported to USCIS. The client has the right to “opt out” of applying for benefits if they do not want this to be done. ***

In the history of the program, no one has gotten in trouble for having their name shared with USCIS.

INDIGENCE FORM

- 09-99 USCIS Letter for Indigent Sponsored Noncitizen
- Must provide the sponsored noncitizen's name and address and the sponsor's name and address
- Must be signed by the client
- Available in English and Spanish

NICK MACCHIONE, MS, MPH, FACHE
DIRECTOR



County of San Diego
HEALTH AND HUMAN SERVICES AGENCY

RICK WANNE, MA, MFT
ELIGIBILITY OPERATIONS DIRECTOR

ELIGIBILITY OPERATIONS
1255 IMPERIAL AVENUE, SAN DIEGO, CALIFORNIA 92101
(619) 338-2876 • FAX: (619) 338-2972

Date _____

To: Ms. Lisa Roney
United States Citizenship and Immigration Services
Office of Policy and Planning, Room 4010
20 Massachusetts Avenue NW
Washington, D.C. 20529-0001

Re: Report of Indigent Sponsored Non-citizen
Federal registers Volume 65, #225

Sponsored Noncitizen Name: _____ Sponsor Name: _____
Sponsored Noncitizen Address: _____ Sponsor Address: _____

Worker Name: _____ Title: _____
Office Name and Address: _____ Phone Number: _____

Worker Signature: _____ Date: _____
Corrective Action Liaison Signature: _____ Date: _____

Attestation/Certification and Release of Applicant

I, _____ have read, or had explained to me, the rules and regulations applicable to "indigent" sponsored noncitizens and declare or affirm under penalty of perjury under the laws of the United States of America and the State of California, that the information provided above are true and correct.

I authorize the County of San Diego Health & Human Services Agency (HHS) to send my name, address and that of my sponsor to the United States Citizenship & Immigration Service (USCIS), and further authorize USCIS to release any information from its records to HHS which is needed to determine eligibility for benefits I am requesting for myself and/or my family.

Signature of Applicant _____ Date _____

Copy provided to Sponsored Noncitizen

Copy provided to Sponsor

4. THE CLIENT CHOOSES TO OPT OUT

- Sponsored noncitizens can choose not to provide sponsor's information and to not receive CalFresh benefits but to allow other household members to continue with the application.
- In this case, the sponsored non-citizen will be treated as an excluded member
- The client's income will be prorated
- No additional information will be collected by HHSA from this person

INCOME PRORATING

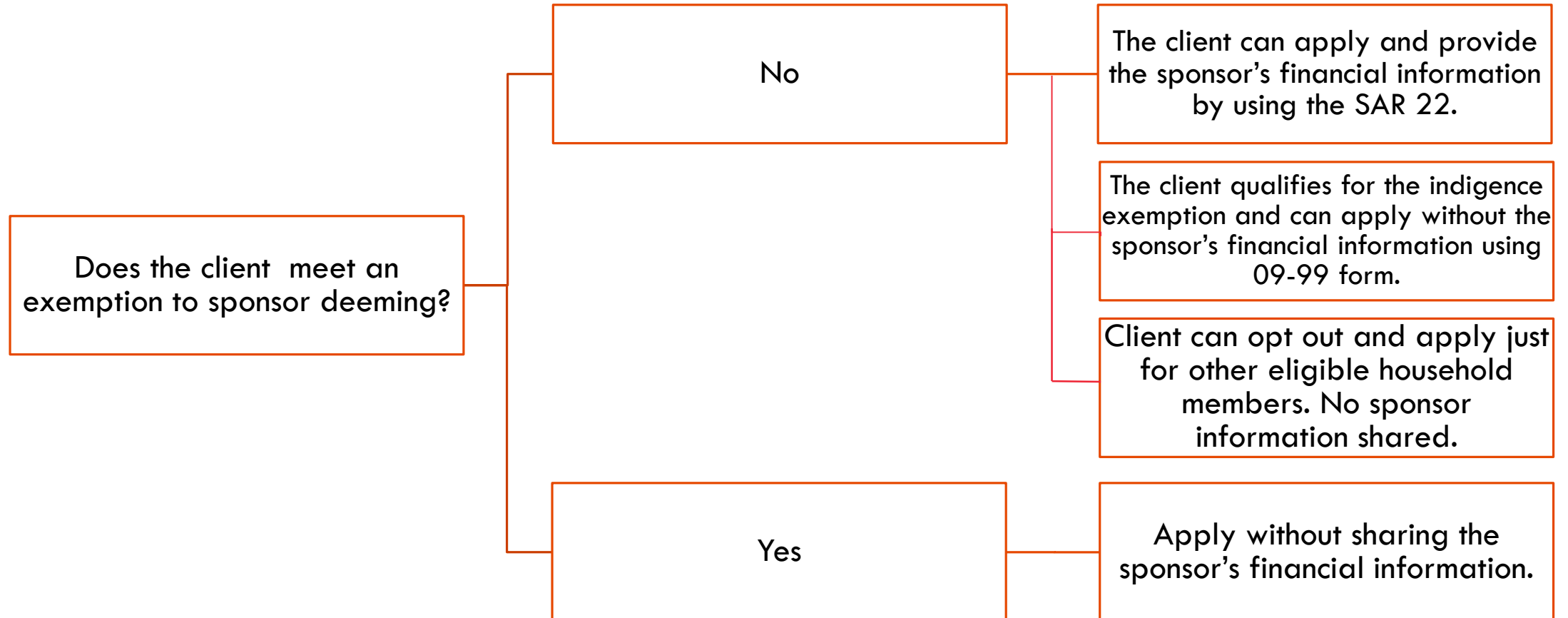
- For individuals who opt out, their income will be prorated to only count the portion that pertains to the qualifying CalFresh household members
- Example: Jennifer and John apply for their family but Jennifer is an LPR and does not want to disclose her sponsor's information. John and their 2 children are US citizens.

Calculations	Description
\$2,000	Gross monthly income of the family
$\$2,000 \div 4 = \500	Divide by number of people in the family
$\$500 \times 3 = \$1,500$	Multiply by the number of legal residents/citizens in the household
\$1,500	Total amount counted towards the household's CalFresh budget

OVERVIEW OF THE OPTIONS

1. The client is exempt from sponsor deeming and applies normally.
2. The client falls under the sponsor deeming category and shares his/her sponsor's financial information. They will complete form SAR22.
3. The client qualifies as indigent and does not need to provide the sponsor's financial information. The client still needs to provide the sponsor's name. They will complete form 09-99 USCIS Letter for Indigent Sponsored Noncitizen.
4. The client has the option of opting out and only applying for the other household members. They will not need to share any sponsor information.

FLOWCHART- STEPS TO TAKE WHEN WORKING WITH SPONSORED NONCITIZENS





ADDITIONAL INFORMATION

Helpful things to know

VERIFICATION PROCESS OF NONCITIZEN STATUS

Clients submit documents like I-551 or I-94.

Worker inputs client's information on SAVE.

If the information matches up, no other action is required.



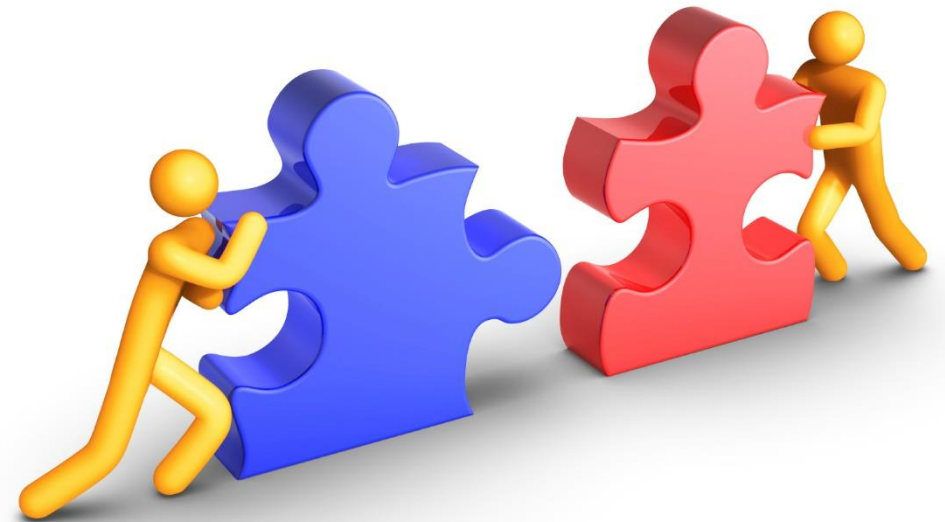
VERIFICATION PROCESS OF NONCITIZEN STATUS

Client submit documents like I-551 or I-94.

Worker inputs client's information on SAVE.

If information does not match, client fills out Form G-845.

Worker, with the client's permission, contacts USCIS.



VERIFICATIONS OF STATUS

- Documents accepted:
 - I-551 also known as green card
 - Category includes INA code
 - Passport annotated by USCIS and I-181 (temporary evidence if lawful LPR)
 - Some I-94 forms depending on INA code
 - Letter of decision or court order on your case
- Documents not accepted:
 - Visitor Visa
 - Passport only
 - Work Visa

USCIS DOCUMENT	INA CODE/ SECTION	CW	MC	FS	GA	USCIS COMMENT/ EXPLANATION
I-94	106	Yes	Yes	No	Yes	Indefinite Stay of Deportation
	203(a)(7)	Yes	Yes	Yes	Yes	Conditional Entry/ Entrant
	207, 207(c)	Yes	Yes	Yes	Yes	Refugee
	208; 208(a)	Yes	Yes	Yes	Yes	Asylum (granted)
	212(d)(5)	Yes	Yes	Yes	Yes ¹	Refugees, Humanitarian Parolees and Public Interest Parolees
	241(b)(3)	Yes	Yes	Yes	Yes	Granted Indefinite Voluntary Departure (on or after 4/1/97)
	242(b)	Yes	Yes	No	Yes	Voluntary Departure
	243(h)	Yes	Yes	Yes	Yes	Granted Indefinite Voluntary Departure (before 4/1/97)
	301	No ²	Yes ³	No ²	Yes	Family Unity
	AM1,-2,-3 6, 7, 8	Yes	Yes			



SAMPLES



**Please note these are not the only ways to verify! These are just samples. **



U.S. Department of Homeland Security
Citizenship and Immigration Services

Chicago Asylum Office
401 S. LaSalle St., 8th Floor
Chicago, IL 60605

Date: 17 JUN 2010

REFER TO FILE NUMBER(S)

Alien # or A#

ORIGINAL

Asylum Approval

Dear Mr. XXXXX:

This letter refers to your request for asylum in the United States filed on Form I-589. This office previously issued you a letter to notify you that your request for asylum had been recommended for approval, pending the results of the mandatory, confidential investigation of your identity and background.

It has been determined that you are eligible for asylum in the United States. Attached please find a completed I-94, Arrival Departure Record, indicating that you have been granted asylum status in the United States pursuant to section 208(a) of the Immigration and Nationality Act (INA) as of **June 17, 2010.**

You have been granted asylum in the United States for an indefinite period; however, asylum status does not give you the right to remain permanently in the United States. Asylum status may be terminated if you no longer have a well-founded fear of persecution because of a fundamental change in circumstances, you have obtained protection from another country, or you have committed certain crimes or engaged in other activity that makes you ineligible to retain asylum status in the United States. See INA section 209(c)(2).

WORK QUARTERS

- 40 qualifying work quarters roughly translates to 10 years worth of work history
- The best way to verify work quarters is through the Social Security's Administration automated system.
 - If not available or if the client wants to dispute the SSA, the client can also use employer-prepared wage statements, W-2 or W-2c, income tax returns as proof of earnings.

WORK QUARTERS

- Individuals can “share” work credits with:
 - Current married couples can combine work credits gained during their relationship. The couple must be currently married. Former spouses can share work credits if the marriage ended by death.
 - In some cases, a person can use parent’s qualifying quarters up to the quarter in which the applicant turned 18, including credits earned before the child was born.
 - Beginning the first quarter of 1997, no credit shall be countable if the individual who earned it received any federal means-tested public benefit.*

THINGS TO KNOW

- Receiving CalFresh will not affect immigration status or application
 - CalFresh is not considered a public charge
 - Immigration Status information is only used to check whether you are eligible for CalFresh. Immigration authorities cannot use this information to deport you unless there is a criminal violation involved.
- Available Resources for clients:
 - *Public Charge Info Sheet*
 - *USCIS Letter*
 - *Myths & Facts for Immigrants*
- Refer to Legal Aid
 - (877) 534-2524

RESOURCES FOR YOU

- Immigration Sponsor Deeming & Indigency Guide
- Class of Admission Codes Table
- www.uscis.gov
- www.nilc.org
- Legal Aid of San Diego





QUESTIONS?

Marcia Garcia
CalFresh Outreach Coordinator
MARCIA@SDHUNGERCOALITION.ORG
P: 619-501-5627