



**Department of Public Works and the Division of Senior
Affairs JC Shovels: Volunteer Initiative**

Application Date: ___/___/___

Name: Last _____ First: _____ MI: _____ Age: _____

Name: Last _____ First: _____ MI: _____ Age: _____
(Spouse that lives in the household)

Please list all individuals that live in your house:

Last _____ First: _____ MI: _____ Age: _____

Identify and Residency proof:

- Driver License
- Utility/ Phone Bill

*Copy of one (1) proof of residency should be
attached to this application*

**SELF DECLARATION OF GROSS HOUSEHOLD INCOME LESS
THAN 185% OF ANNUAL POVERTY GUIDELINES**

I (we) hereby swear that I (we) _____

I (we) have a gross income of \$ _____ Weekly, Monthly, Yearly (Please Circle One)

Signature of Recipient

*****For official use only, do not write below this line*****

Received by _____ Initials _____ Signature _____