



## ZERO INCOME AND/OR UNEMPLOYED CERTIFICATION

(To be completed by each adult household member only, as appropriate.)

Household member: \_\_\_\_\_

1. I hereby certify that I do not individually receive income from any of the following sources:
  - a. Wages from employment (including commissions, tips, bonuses, fees, etc.);
  - b. Income from the operation of a business;
  - c. Sales from self-employed resources;
  - d. Rental income from real or personal property;
  - e. Interest or dividends from assets;
  - f. Social Security payments, annuities, insurance policies, VA benefits, retirement funds, pensions, or death benefits;
  - g. Unemployment or disability payments;
  - h. Public assistance payments; *MN Family Investment Program (MFIP), General Assistance (GA), MN Supplemental Assistance (MSA), etc.*
  - i. Periodic allowances such as alimony, child support, or gifts received from persons not living in my household;
  - j. Educational Grants and/or scholarships or Veteran Benefits available for subsistence after deducting expenses for tuition, fees, books, etc.;
  - k. Any other source not named above.
2. I hereby certify that I currently have no income of any kind and there is no imminent change expected in my financial status or employment status during the next 12 months.

*Under penalty of perjury, I certify that the information presented in this certification is true and accurate to the best of my knowledge. I understand that providing false representations herein constitutes an act of fraud and will lead to cancellation of this application.*

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_