



Application Acknowledgment

Name: _____

Application Date: _____

Complete _____ **Incomplete** _____

SAVE: Citizenship/Identification

	Flagged	
	Birth Certificate	
	Passport	
	Social Security Card	
	State Issued ID	
	Supplemental Document	

Income:

	Pay Stubs	
	Award Letter	
	Other	

_____ I understand that by initialing this line, I am confirming that my application is currently incomplete and that I have **14 days** from the date of this application to return my documents to BVCAP. Failure to return these documents in the given time period will result in my application being deemed incomplete and no further action will be taken.

_____ I acknowledge that I have received support services and referrals in the following areas:

- Utility Assistance Crisis Appliance Assistance Case Management Housing Food
- Lite-Up Texas program Medical/Dental Employment Personal/Family Issues Counseling Services Education Transportation Child Support Referral Head Start/Early Head Start Child Care WIC Financial Services WAP 211

_____ I have been given a handout informing me of program parameters of the CEAP bill pay system.

_____ Former Military Service Members received referral to <https://veterans.portal.texas.gov/>

Client Confirmation of Receipt and Understanding of Information Packet

I understand that by signing this form, I am confirming:

- I have received the BVCAP information packet
- My responsibilities were explained to me
- I understand my client responsibilities in the BVCAP Comprehensive Energy Assistance Program

Client Signature

Date

Email: aupchurch@capbv.org PO Drawer 4128 Bryan, TX 77805 Fax: (979)595-2851