

**INSTRUCTIONS FOR  
FOOD & NUTRITION  
HOUSEHOLD APPLICATION FOR USDA FOODS (H1555)  
THE EMERGENCY FOOD ASSISTANCE PROGRAM**

The *Household Application for USDA Foods* (Form H1555) is an application to qualify households to receive United States Department of Agriculture (USDA) Foods through The Emergency Food Assistance Program (TEFAP). The Texas Department of Agriculture (TDA) administers TEFAP in Texas by contracting with organizations for distribution of USDA Foods.

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CEs or sites should complete the *Household Application for USDA Foods* (Form H1555) when a household initially requests distribution of USDA Foods through TEFAP. Thereafter, CEs or sites should complete this form at least yearly if the household requests to continue TEFAP benefits.

**Notes**

- CE or site may request but must not require proof of information on this form.
- Complete one original per household.
- Keep the original on file.
- Maintain separate records for each household.
- Make additional copies as needed or download *Household Application for USDA Foods* (Form H1555) at [www.squaremeals.org](http://www.squaremeals.org). (Choose Programs, The Emergency Food Assistance Program, TEFAP Administration and Forms, then enter the form number in the appropriate search field.)
- Retain the applications and distribution records of households for three years following the end of the certification periods corresponding to the documents.  
*Exception: If audit findings, claims, or litigation have not been resolved by the end of the retention period, keep all forms and records until all issues are resolved.*
- Retain records of household denials for three years following the decision date.
- TDA does not require the CE or site to use *Household Application for USDA Foods* to determine eligibility. Instead, the CE or site can use an alternate form as long as it contains **all** the information that appears on the H1555. CEs may also refer to *TEFAP Handbook*, Section 3, *Managing the Program*, “*Household Application for USDA Foods.*”

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**Section 1 — Household Information**

**Name of household member** — Enter the name of the household member applying on behalf of the household.

**Number of household members** — Enter the number of household members for whom USDA Foods are requested.

**Address** — Enter the household's address. CEs or sites may request but must not require proof of address.

**Name of proxy (person given the authority to act on behalf of household)** (optional) — Enter this information if it is applicable. To change a proxy, CEs and sites must collect a written statement from the participant that contains the following information:

1. Participant's name
2. Proxy's name
3. Date of proxy change
4. Duration of time the proxy designation will be in effect

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## Section 2 — Categorical Eligibility

If a household currently receives one or more of the specific types of assistance listed, mark the appropriate assistance type(s). If the household does not receive any of the assistance types listed, leave the assistance types blank. CEs or sites may request but must not require proof of other assistance.

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## Section 3 — Income Eligibility

**Total gross income** — This information is optional if the household is categorically eligible. (See Section 2.) Enter the total gross income of all household members, as stated by the household, and mark whether the income is received yearly, monthly, or weekly. CEs or sites may request but must not require proof of income.

*Note: Farmers and self-employed persons may report net income (the amount after business expenses). This net income will be added to the gross income, if applicable, of other household members, to arrive at the total gross income for the household.*

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**Section 4— Household Crisis Eligibility**

Complete Section 4 only if the household is ineligible because of information obtained in Sections 2 and 3.

Households qualify based on unexpected and unavoidable expenses of a household crisis.

Characteristics of a Household Crisis	Examples of Unexpected Costs of a Household Crisis <i>(The CE or site may define and document other circumstances.)</i>
1. Unexpected 2. Temporary 3. Beyond the household’s control	1. Necessary medical treatment of a household member 2. Burial expenses of a household member 3. Uncontrolled loss of employment 4. The repair or replacement, because of a household disaster <sup>1</sup> , of the household’s home, home contents, or vehicle

In the space provided, document the cause of the household crisis.

Indicate eligibility and length of certification. (Must not exceed six months.)

**Section 5 — Certification**

Please ensure the applicant reads the full acknowledgement statement or read it to applicant.

**Section 6 — Eligibility or Ineligibility**

Indicate eligibility and length of certification. (Must not exceed one year.)

Indicate ineligibility then complete Section 4 if necessary.

**Section 7 — Signature and Date**

The CE or site’s representative must sign and date the form.

<sup>1</sup> Household disasters may include fire, flood, hurricane, tornado, care repairs, and other circumstances or incidents as defined and documented by the CE or site.