Instructions for
Commodity Supplemental Food Program
Participant Application (Form H1504)

This form is used to document the eligibility of program applicants for the Commodity Supplemental Food Program (CSFP) benefits for the following circumstances:

- **Certification** — An applicant applies for benefits. See pages 1–2 of the form. Certification may not exceed a period of three (3) years.

- **Annual Validation** — The certification period may not exceed three (3) years and on an annual basis, the contracting entity (CE) must verify the following conditions are met:¹
  1. The participant’s address remains the same.
  2. The participant still wants to receive CSFP benefits.
  3. The CE has sufficient reason to believe that the participant still meets income eligibility standards.

  If yes to all three conditions, see page 3 of the form to enter dates for the annual validation. If any of these three conditions are not met, the CE must conduct a formal review and, if determined to meet eligibility requirements, certify the participant for another period not to exceed three (3) years. The CE may use any method of its choice to conduct the annual validations. For example, the CE may conduct the annual validation over the phone or in person.

  NOTE: If a CE uses a three-year certification period, the annual validation will be conducted twice (if the three conditions continue to be met) before the participant must be certified again for a maximum of three years.

- At the end of the certification period, the CE must conduct a formal review of the participant’s eligibility using pages 1 and 2 of Participant Application (H1504).

**Notes**

- To obtain Form H1504, visit the Texas Department of Agriculture (TDA) website at: [www.squaremeals.org](http://www.squaremeals.org). Go to Programs, Commodity Supplemental Food Program, CSFP Administration and Forms, then enter the form number into the appropriate search field.
- The CE’s completes one copy of Form H1504.
- Maintain originals in client files for review.
- Keep Form H1504 for three years from the end of the fiscal year² to which they pertain. **Exception:** If audit findings, claims, or litigation have not been resolved by the end of the retention period, all forms and records must be retained until all issues are resolved.
- At the time of application, some form of identification for each applicant must be provided. Identification may include, but not limited to, any of the following:
  - Birth certificate

¹ CE is used when discussing the certification of participants; however, site personnel, such as an eligibility specialist, may certify eligible participants on behalf of the CE.
² Fiscal year means the period from October 1 through the following September 30.
Household Information

Name of applicant — Record the applicant’s complete name.

Address — Applicant’s address. Applicants must reside within a designated CSFP service area on the day of certification to be eligible to participate in the CSFP; therefore, the address must be provided on the application. Proof of residency is not required.

Date — Enter the date

Date of birth — Enter the applicant’s date of birth. This date will be used to determine if the applicant is at least 60 years of age. Proof of date of birth is not required.

Phone number — Applicant’s phone number. Although a phone number is helpful, it is not required for participation in the CSFP.

Site name — Ensure that the site name is entered as established by the CE.

Name of proxy — If applicable

Phone number — Proxy’s phone number

Dates of proxy — Beginning date and ending date

Income Information

Total gross income (before deductions) of all household members — Calculate the total gross income of all household members, before deductions. Total net household income is not valid when determining income eligibility.

Applicants are not required to provide proof of income, however, all sources of the applicant’s household income, not excluded below, must be used to calculate the total gross income of all household members.

To convert to annual income: multiply weekly income by 52; every two weeks by 26; twice a month by 24; and monthly income by 12.

NOTE: The following items are excluded from consideration as income for households when determining CSFP eligibility:

- Supplemental Nutrition Assistance Program (SNAP) benefits
- Family Subsistence Supplemental Allowance
• National Flood Insurance Program payments
• Medicare Prescription Drug Card subsidy
• Filipino Veterans Equity Compensation Fund payments authorized by the American Recovery and Reinvestment Act of 2009 for certain veterans, or for surviving spouses of veterans, who served in the military of the Government of the Commonwealth of the Philippines during World War II.
• Lump sums or periodic payments from the Cobell settlement

Number of household members — When counting household members, the ES will include all related and non-related individuals, exclusive of boarders, who are not residents of an institution, but who live as one economic unit and for whom food is customarily purchased and prepared in common.

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Eligibility

Eligible — Applicant is eligible when they meet income, residency, and age requirements.

Eligible and on waitlist — Applicant meets all eligibility criteria; however, the CE does not have available caseload. The eligible applicant is placed on the waitlist.

Dates of certification — The certification period for eligibility may not exceed three (3) years from the date that the CE determines eligibility. The month of certification counts as the first month. For example, an applicant is determined to be eligible and was certified on May 13, 2019. The three-year certification period would expire on May 31, 2022.

Ineligible — The CE must indicate the criteria for ineligibility: income, residency, or age. Inform the applicant in writing of the following:
  • They are ineligible to participate in the CSFP.
  • The reason they are ineligible.
  • They have a right to a fair hearing.

NOTE: CEs or sites may use the Application Notification (Form H1515). To find Form H1515, go to www.squaremeals.org, choose Programs, Commodity Supplemental Food Program, CSFP Administration and Forms, then enter the form number into the correct field.

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Nondiscrimination Statement

Ethnicity and Race

USDA prefers that applicants identify their own ethnicity and race. Sometimes, however, an applicant is either hesitant or uncomfortable — or simply declines — to give this information. In such a case, the CE or site personnel may encourage the applicant by explaining how the information will be used. The text below is a sample explanation:

“Your response will not affect our consideration of your application. Your information may be protected by the Privacy Act. When you share this information with us, you help us ensure that we are administering the CSFP in a nondiscriminatory way. Also, this information is used to determine Texas’s compliance with federal civil rights laws.”
Ethnicity — Check the appropriate box.

_Hispanic or Latino._ A person of Cuban; Mexican; Puerto Rican; South or Central American; or other Spanish culture or origin, regardless of race. The term “Spanish origin” can be used in addition to “Hispanic or Latino.”

_Not Hispanic or Latino._

Race — Check the appropriate box(es). One or more racial designations may be selected.

_Black or African American._ A person having origins in any of the black racial groups of Africa. Terms such as “Haitian” or “Negro” can be used in addition to “Black or African American.”

_Native Hawaiian or Other Pacific Islander._ A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

_American Indian or Alaskan Native._ A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.

_Asian._ A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

_White._ A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

_Certification Statement_

The certification statement must be read to the applicant, or the CE or site personnel must ensure that the applicant reads the statement.

CEs or sites must provide _Participant Rights and Responsibilities_ (Form H1516) at application, at denial of certification, and at termination.

The CSFP _Written Notice of Beneficiary Rights_ form must be made available to all applicants. Upon the request of the applicant or participant, CEs or sites must give them a copy of the _Written Notice of Beneficiary Rights_

_Signatures_

Applicant or Proxy’s Signature

CE or Site’s Signature
Annual Validation

Participant’s Name and Signature

Proxy’s Name and Signature — If applicable.

Note: The CE may use any method of its choice to conduct the annual validation. For example, the CE may conduct the annual validation over the phone or in person. If conducted over the phone, instead of a signature, the CE must make a notation on the form that the annual validation was not conducted in person.

CE or Site’s Name and Signature

Date — Enter the date

Ask the participant the following questions and indicate the answer on the form.

1. Has your address changed?
2. Do you still want to receive CSFP benefits?
3. Does the CE or site believe that the participant still has an income that meets eligibility requirements?

If any of the three annual validation conditions are not met, the CE must conduct a formal review to determine the participant’s continued eligibility.

Dates of annual validation – Specify the beginning and ending date of the annual validation.