



The Prevention/Retention/Contingency (PRC) Program Overview

What PRC Is:

PRC is designed to help families residing in Hamilton County overcome immediate employment-related barriers. Our goal is to help families achieve or maintain self-sufficiency by lessening the need for ongoing public assistance.

Eligible applicants can receive PRC services once in any 12-month period. Assistance available depends on the needs of each applicant.

What PRC Is Not:

PRC is not an entitlement or a cash payment. PRC does not provide ongoing support such as the assistance provided by Ohio Works First (OWF).

PRC Benefits Include:

- **Pregnant and newborn mothers** are approved for supports ranging from breast pumps to car seats.
- **STNA/CNA students** at Great Oaks are provided tuition, transportation assistance, and scrubs.
- **Homeless families** can receive assistance with furniture and beds when they exit or avoid shelters.
- **Utility assistance** is available for bills associated with Duke or Water Works.
- **Newly employed** applicants can be provided with tools or uniforms as well as transportation assistance.
- **Employed applicants can receive gas cards or bus passes to help manage a short-term funding challenge that might otherwise threaten their employment.**
- **Rent/Deposit** assistance can be provided in association with a partner referral and active case management. This service is only available if the referring partner has secured a completed vendor registration form from the landlord that payment is being issued to.

Eligibility Requirements for PRC:

1. Must be at least 18 years old
2. Must have at least 1 dependent (minor child)
3. Must meet income requirements of 200% of Federal Poverty Guidelines
4. Must be gainfully employed or have an employment offer that can be secured with PRC assistance, or proof of sustainable income

Applications are available for PRC assistance at:

- The OhioMeansJobs Center at 1916 Central Parkway
- Hamilton County Job and Family Services at 222 E. Central Parkway
- An online application is available at:
<https://www.hcifs.org/media/HCJFS-8067-PRC-Application-Packet.pdf>

All PRC applications can be:	<i>Dropped off or mailed to</i> →	1916 Central Pkwy, Cincinnati, OH 45214
	<i>Faxed to</i> →	(513) 946-7270
	<i>Emailed to</i> →	HAMIL_PRCapplications@jfs.hamilton-co.org

Application for Prevention, Retention, and Contingency Program (PRC) and Project LIFT

Name of Applicant	Present Address
Social Security Number	
Telephone Number Where You Can Be Reached	
Email Address Where You Can Be Reached	

For Referral Partner Only
Referring Organization
Referring staff person
Phone and email for referring staff person
Intended funding source

1. Explain what you need, give an estimate of how much you need, and describe how meeting this need will help your family avoid dependence on public assistance.

I am requesting help with:	Amount of funding requested:
	\$

2. List the names of all other agencies you have contacted for help:

Agencies you contacted to help you with this need:	Was this agency able to help you?		EXPLANATION: If this agency helped you - explain how: If they did not help you - explain why not:
	Yes	No	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	

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|---|------------------------------|------------------------------|
| 3. Is any member of your household indebted to HCJFS for an overpayment due to fraud? | <input type="checkbox"/> No; | <input type="checkbox"/> Yes |
| 4. Is any member of your household an unmarried, non-graduate parent under 18 not attending high school or equivalent? | <input type="checkbox"/> No; | <input type="checkbox"/> Yes |
| 5. Is any member of your household an unmarried parent under 18 not living in an adult-supervised setting? | <input type="checkbox"/> No; | <input type="checkbox"/> Yes |
| 6. Is any member of your household an alien not lawfully admitted for permanent residence? | <input type="checkbox"/> No; | <input type="checkbox"/> Yes |
| 7. Is any member of your household a fugitive Felon, parole or probation violator? | <input type="checkbox"/> No; | <input type="checkbox"/> Yes |
| 8. Is any member of your household not cooperating in establishing paternity or securing child support? | <input type="checkbox"/> No; | <input type="checkbox"/> Yes |
| 9. Has any member of your household been found guilty of fraudulently misrepresenting their residence to obtain benefits in two or more states (within the last ten years)? | <input type="checkbox"/> No; | <input type="checkbox"/> Yes |
| 10. Have you or any member of your household received PRC assistance within the last twelve months? | <input type="checkbox"/> No; | <input type="checkbox"/> Yes |

If one or more of questions 3 through 10 above are answered yes, indicate here which person(s) and condition(s):

11. Complete the chart below for anyone living in your home, including yourself. You are required to verify all income for all members of your household.

Name	Relationship to Applicant	Age	Source of Income	Monthly Amount of Income	Type of Liquid Resource (cash, savings, checking)	Amount of Resource
1.				\$		\$
2.				\$		\$
3.				\$		\$
4.				\$		\$
5.				\$		\$
6.				\$		\$
7.				\$		\$
8.				\$		\$

My signature below affirms that the information above is true and correct to the best of my knowledge and belief.

Signature of Applicant:	Date:
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