

Specified Relative Grant Information and Instructions (Modified from DWS informational sheet)

When a child comes to the home of a relative, the caregiver may go to the local Department of Workforce Services (DWS) for assistance. The caregiver may apply for a Specified Relative Grant. The caregiver should go to the office that serves the zip code of the caregiver's residence. The Specified Relative Grant falls under the umbrella of the DWS Family Employment Program (FEP). This grant may include a small financial support for the relative and will provide Medicaid coverage for the child.

The relative must meet the following criteria to qualify for the grant:

1. The relative must be one of the following relationships to the child and the relationship is required to be verified (usually through birth certificates).

- Grandfather or grandmother
- Brother or sister
- Uncle or aunt
- First cousin
- First cousin once removed (a first cousin's child)
- Nephew or niece
- Persons of preceding generations as designated by prefixes of grand-, great-, great-great, or great-great-great
- Spouses of any relative mentioned above even if the marriage has been terminated
- Persons that meet any of the above mentioned relationship by means of a step relationship such as stepbrothers and stepsisters
- Brothers and sisters by legal adoption
- Individuals who can prove that they met one of the above mentioned relationship via a blood relationship even though the legal relationship has been terminated. This one is for Financial only and not for Medicaid.
- Ex-step parents. This one is for Financial only and not for Medicaid.

2. The child has to be residing outside the home of the parent(s) and in the household of a relative (as defined above). This means that the parent(s) cannot reside in the relative's household with the child and receive the grant.

3. The relative must complete Duty of Support paperwork against both absent parents of the child and pursue monetary child support through the Office of Recovery Services (ORS) when seeking financial assistance.

4. When the relative is seeking Financial and Medicaid benefits for the child only, DWS will only consider the child's income and assets when determining eligibility and the child will receive a financial grant for a household size of one and/or Medicaid for the child until the age of 18. *A variance may be filed if the child is between the age of 18 and 21 years of age if that child is required to remain in state custody.*

The relative can obtain the Specified Relative Grant application from the DCFS caseworker, their local Department of Workforce Services, or they can go online to the Department of Workforce Services homepage and download the application: *go to www.jobs.utah.gov ► click on Food and Financial ► click on Financial Services ► click on Specified Relative Program ► click on Forms (at the bottom of the screen).*

The application must be completed and approved before a grant may be issued. For assistance with the form, refer to the following instructions (see next page):

Specified Relative Grant Application Questions

To complete an application for the child-specific Specified Relative Grant, **hand-write at the top of the application “Specified Relative Grant”** and follow the instructions as they correspond to the numbered questions on the application. Based on DWS application revision date, 11/2022 - for the financial application to be considered complete, you must fully answer:

Page 1, questions 4 – 5, 7 – 10, 12 - 30, the entire Financial Section (34-40) AND sign page 13.

If any questions are left unanswered, the application will not be registered.

Check any services you are applying for. Specified Relative Grant will fall under Cash/Financial Assistance. Financial Assistance and Medicaid go off the child’s income while SNAP and Child Care benefits go off the household income (including caregiver’s information). If applying for Medicaid, you can mark that you would like retroactive assistance for the last 90 days.

1. Fill out as the primary Kinship Caregiver.
2. If the Kinship Caregiver has a current Horizons Card, mark yes. If marked “No”, DWS will send a new card (previous cards will stop working).
3. If Kinship Caregiver and **all those applying** for Medicaid (if applicable) have a current Utah Medicaid card. (For Medicaid applications only.) Marking “No” will send you, and those you wrote in, a new card.
4. List Caregiver as the first person in the household. List all kinship children who are also applying for the SRG. No need to add other household members (spouses, biological children, etc.)
5. Mark **Yes** (if applicable) and list all adults/other kids living in the home but not applying for SRG.
6. Answer for the child: Mark “**No**”. (The child would not file their own tax return).
7. Answer for the child: (Is the youth pregnant?)
8. Answer for the child: - Mark “**No**”. (The child must be living with you).
9. Answer for the child.
10. Answer for the child, to the best of your knowledge.

Would be “**Yes**” if child has ever been on SNAP, Financial, or Medical in the past.

11 - 16. Answer for the child.

17– 33. *Income/Personal Assets*: Fill out this section for the child only, meaning do not include caregiver income or assets. (If the child is receiving Social Security Survivor Benefits, Child Support, or SSI: indicate in the boxes if the kinship caregiver is receiving those funds, but do not mark if those funds are going to the parent/guardian and report this to DWS when the funding comes to your household.)

34 – 40. *Financial Assistance Section*: Fill out all questions in this section completely or the financial application will not be registered. The SRG counts as “Financial Assistance”.

- 38. Must be marked “**Yes**” on both questions or the financial program will be automatically denied. Absent parent information must also be filled out completely.

- 39. Mark “**No**” if you are only applying for financial assistance for the specified relative child(ren). Marking “**Yes**” means the applicant wants to be included in the grant along with the specified relative child(ren), and DWS will base eligibility on anyone in the household related to the applicant and living in the home (for example: spouse, other children); their income, assets, etc. will then count.

Answer as the child:

41 – 51. Only complete if you are also applying for Child Care Assistance.

52 – 72. Only complete if you are also applying for SNAP.

73 - 88. Only complete if you are also applying for Medicaid (or SNAP).

Signature Page:

- Signature:* Primary Kinship Caregiver prints on first line and then signs on second line.
- Representatives Sections:* Signature of authorized representative is signed by a caseworker in order to share information back and forth (corresponds with #6 and the 114AR and 114D). Signature for release is signed by Kinship Caregiver only if they want caseworker to be the authorized representative. Family Advocates should not be authorized representatives.
- Voter Registration:* Mark yes or no.
- Medical Only:* Mark how often you would like to renew the child’s coverage.

To File:

When you take the application into DWS, you will need the child(ren’s), parent, and Kinship Caregivers original birth certificate and marriage certificates to prove relationship between Kinship Caregiver and child. Talk with your DWS worker about your option for assistance, either child specific or household benefits. Guardianship might qualify for this!

If any of the attachments apply to the family, we suggest getting a DWS caseworker because they are outside the scope of a typical case.

Online Instructions:

If you want to find applications online, go to <https://medicaid.utah.gov/apply-medicaid/>

If you want to file the application online:

1. Go to jobs.utah.gov > Assistance > Support Services Application
2. Brings you to “My Case” and create a new account.
 - a. Choose “Myself or my household” and put in caregiver’s SSN.
 - i. Don’t need case number at first.
 - b. Select any one you want to apply for.