

This guide identifies the documents you can submit to show that you qualify for the Affordable Connectivity Program (ACP).

- Please make sure all of your documents are current. We **<u>CANNOT</u>** accept expired documentation.
- Send copies or pictures of your original, valid document. **NEVER** send the original document.

If you applied to the ACP because your dependent is a Benefit Qualifying Person (BQP) (someone who participates in an ACP qualifying program), make sure all of the documents, such as a Medicaid benefit letter, Special Supplemental Nutrition Program for Women, Infants and Children (WIC) documentation, Community Eligibility Provision (CEP) school enrollment documentation, or proof of participation in the Free and Reduced Price School Lunch Program or School Breakfast Program have their name where appropriate.

Visit <u>AffordableConnectivity.gov</u> for more information on Documents Needed.

Proof of Program or	Provide an official document to prove you participate in one of the qualifying programs OR to prove that you qualify based on your household income.					
Income Eligibility	Option 1: If you participate in one of the qualifying programs below, provide a letter or official document as proof.					
	Check that your document has the following information: Your name, or your dependent's name The name of the qualifying program The name of the government or Tribal agency that issued the document An issued date within the last 12 months or a future expiration date	 Qualifying programs: Medicaid Supplemental Nutrition Assistance Program (SNAP) Supplemental Security Income (SSI) Federal Public Housing Assistance (including Housing Choice Voucher (HCV) Program (Section 8 Vouchers), Project-Based Rental Assistance (PBRA)/202/811, Public Housing, and Affordable Housing Programs for American Indians, Alaska Natives or Native Hawaiians). Veterans Pension or Survivors Pension Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) If you live on Tribal lands, you may also qualify through: Bureau of Indian Affairs (BIA) General Assistance Tribally-Administered Temporary Assistance for Needy Families (TANF) Tribal Head Start Food Distribution Program on Indian Reservations 				
	Option 2: If you participate in one of the educ	for SNAP or Medicaid, screenshot of online portal, and Survivors Benefit Summary letter. cation-related qualifying programs below, provide a letter,				
	official document, or screenshot as proof.					
	 Check that your document has the following information: Your (or your dependent's) first and last name Name of the qualifying program (not required for Community Eligibility 	 Qualifying programs: Federal Pell Grant Free and Reduced-Price School Lunch Program or School Breakfast Program, including through the USDA Community Eligibility Provision (CEP) Examples of documents include: 				
	Provision) Name of the School or School district	• A letter from the school or school district that confirms a member of the household receives free and reduced price				

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Types of Documents Accepted for the Affordable Connectivity Program

	A current award year (Pell Grant)	school lunch or se	chool breakfast f	for the cur	rent schoo	lvear			
	Dated for the current school year or the	school lunch or school breakfast for the current school year or school year immediately preceding the application,							
	school year immediately preceding the	-		-					
	application (for school lunch or breakfast	 For enrollment in a CEP school – School documentation demonstrating the student is enrolled in a CEP School for the relevant school school (ctudent school to the school schol school school school school school school school school sch							
	qualifying programs)								
		relevant school year (student must still be enrolled in the			the				
	Address and contact information for the	CEP school at the time of the application),							
	school, school year for which the student	• For Federal Pell Grants, written confirmation from a							
	is enrolled (required for Community	student's school (college or university, community college, or career school) or the Department of Education that the student has received a Pell Grant for the current award year							
	Eligibility Provision)								
						-			
	Option 3: If you qualify through your income, provide documentation that shows your annual income and be sure to <i>include your household size on the income documentation</i> .								
	Check that your document has the following	Household Size							
	information:		& Territories						
	☐ Your name, or your dependent's name	1 person	\$27,180	\$33,980	\$31,260				
	Current income information (monthly or	2 people	\$36,620	\$45,780	\$42,120				
	annual income amount)	3 people	\$46,060	\$57,580	\$52,980				
	☐ If providing paystubs, 3 consecutive	4 people	\$55,500	\$69,380	\$63,840				
	months of paystubs	For each additional	\$9,440	\$11,800	\$10,860				
	An issued date within the last 12 months	person, add							
	or prior year tax document	Examples of docum		-		eral, or			
		Tribal tax return or a	a Social Security	Benefit St	atement				
Proof of Valid	Provide one of the following:								
Address	 Map that shows your physical address or locat 	tion including latitude	and longitude (coordinate	s (coordin	atos aro			
Audress		tion, metading tatitud		conumate	3 (00010111				
	 required if you live on Tribal lands) Official document that shows your name and address, such as a Driver's License, valid government, state, or 								
	Tribal ID, utility bill excluding wireless phone l								
	-		ys), w-2 or tax re	cum, or m	Ji tgage of	lease			
One-Per-	Complete and Sign the ACP Household Worksheet								
Household									
Worksheet									
Proof of Date	Provide a copy of an official, unexpired do	cument that has:							
of Birth	□ Your first and last name								
of Birth	 Your date of birth 								
	Examples include:								
	Government, military, state, or Tribal ID Certificate of U.S. Citizenship or Naturalization								
	Driver's License	Permanent Resident Card or Green Card							
	Birth Certificate	 Permanent Resident Card of Green Card Government assistance program document 							
		- 00001111	icine assistance p	n ogrann ut	Jeament				
Droof of CCN/4			r full Tribal ID y	with your	annlicatio	n			
Proof of SSN4 or Tribal ID	If you provided the last four digits of your Soci provide a copy of an official document that has	al Security Number o	or full Tribal ID v	vith your a	applicatio	n,			
	If you provided the last four digits of your Soci provide a copy of an official document that has	al Security Number o	r full Tribal ID v	vith your a	applicatio	n,			
	If you provided the last four digits of your Soci provide a copy of an official document that has Your first and last name	al Security Number o s:		-					
	If you provided the last four digits of your Soci provide a copy of an official document that has	al Security Number o s:		-					
	If you provided the last four digits of your Soci provide a copy of an official document that has Your first and last name The last 4 digits of your social security nu four digits of your SSN)	al Security Number o s:		-					
	If you provided the last four digits of your Soci provide a copy of an official document that has Your first and last name The last 4 digits of your social security nu four digits of your SSN) Examples include:	al Security Number o s: mber or your full Trib;	al ID (please redc	act or mark					
	If you provided the last four digits of your Soci provide a copy of an official document that has Your first and last name The last 4 digits of your social security nu four digits of your SSN) Examples include: Social Security Card	al Security Number o s: mber or your full Trib; • Taxpaye	al ID <i>(please redc</i> r Identification D	act or mark	rout all bu	t the last			
	If you provided the last four digits of your Soci provide a copy of an official document that has Your first and last name The last 4 digits of your social security nu four digits of your SSN) Examples include: Social Security Card Prior year's tax return or W-2	al Security Number o s: mber or your full Trib; • Taxpaye	al ID (please redc	act or mark	rout all bu	t the last			
	 If you provided the last four digits of your Social provide a copy of an official document that has Your first and last name The last 4 digits of your social security nut four digits of your SSN) Examples include: Social Security Card Prior year's tax return or W-2 Government assistance program document 	al Security Number o s: mber or your full Triba • Taxpaye • Unemplo	al ID <i>(please redc</i> r Identification D pyment/Worker's	act or mark Document s compens	out all but	t the last			
	If you provided the last four digits of your Soci provide a copy of an official document that has Your first and last name The last 4 digits of your social security nu four digits of your SSN) Examples include: Social Security Card Prior year's tax return or W-2	al Security Number o s: mber or your full Triba • Taxpaye • Unemplo our Social Security Nu	al ID <i>(please redc</i> r Identification D pyment/Worker's Imber or full Tri	occument s compens	out all but ation state h your	t the last			

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Proof of Life	Document, or other Government ID from one of the lists above that includes your <u>first name, last name, and</u> <u>date of birth</u> to validate your identity. Note: An Individual Taxpayer Identification Number (ITIN) Document does not need to include date of birth. Provide copies of official documents to prove your identity <u>AND</u> to prove you are alive.					
	Prove Your Identity* Provide one or more documents that confirm: Your first and last name Your date of birth The last 4 digits of your social security number or your full Tribal ID (<i>please redact or mark out all but the last four digits of your SSN</i>) Examples include: Government, military, state, or Tribal ID or Driver's License Government assistance program document Birth Certificate Social Security Card Prior year's tax return or W-2	AND	Prove You Are Alive Provide one document that: Confirms your first and last name Shows life activity within the last 3 months Examples include: Government assistance program document Current utility bill Current mortgage or lease statement Current retirement/pension statement of benefits Current unemployment statement of benefits			
Proof of Emancipation Minor	 *If you <u>did not</u> provide the last four digits of your Social Security Number or full Tribal ID with your application, provide a Driver's License, Military ID, Passport, Individual Taxpayer Identification Number (ITIN) Document, or other Government ID from the list above that includes your <u>first name, last name, and date of birth</u> to validate your identity. Note: An Individual Taxpayer Identification Number (ITIN) Document does not need to include date of birth. If you are an emancipated minor, provide a copy of: A court document or certificate that says you are an emancipated minor 					

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