

## PRIORITY POINTS CHECKLIST

Name: \_\_\_\_\_

SSN(Last 4 digits): \_\_\_\_\_

<b>Employment Status:</b>			
	Unemployed	5	
	Underemployed	3	
<b>Department of Human Services:</b>			
	Receiving TANF	5	
	Receiving Food Stamps	3	
<b>General Assistance:</b>			
	Yes	5	
	No	0	
<b>Disability:</b>			
	Permanent	5	
	Temporary	3	
<b>Veteran or Qualifying Spouse</b>			
	Yes	5	
	No	0	
<b>Basic Skills Deficient / English Language learner</b>			
	Yes	5	
	No	0	
<b>Total Points</b>			