

Requirements for TOMAGWA'S Eligibility

The information below is required by TOMAGWA HealthCare Ministries to determine if you qualify to receive discounted medical services.

1. Completed application that includes the names of all household members.
2. Proof of unexpired identification. Examples include, but are not limited to:
 - **State Driver's license/ID**
 - **Passport/Visa/immigration document**
3. Proof of address. Examples include, but are not limited to:
 - **Utility Bill**
 - **Voter registration card**
 - **Shelter Letter**
 - **Car Insurance/vehicle registration**
4. Proof of income for all individuals living in the household. Examples include:
 - **Paystubs (dated within the last 60 days):**
 - Weekly*- provide 2-3 paystubs
 - Biweekly/Twice per month*- provide 2 paystubs
 - Monthly*- provide 1 paystub
 - **Most recent income tax return (including Schedule C)**
 - **Statement of Support Form (available on website)**
 - **Wage Verification Form if unable to provide paystubs (available on website)**
 - **Current year benefits letter.** Examples include the following
 1. **Social Security Disability Income (SSDI)**
 2. **Retirement Survivor Disability Income (RSDI)**
 3. **Retirement/Pension**
 4. **Unemployment Benefits**
 5. **Military Pay**
 - **If paid in cash or self-employed complete:**
 - **Self-Employment Form (available on website)**

Please note that we follow the **Federal Poverty Guidelines** established by the U.S. Government for the current year to determine your eligibility. TOMAGWA reserves the right to verify and determine the validity of all documents presented with your application. **Falsification of any information and/or documentation will disqualify you from receiving any services under TOMAGWA HealthCare Ministries. Please provide all documentation within 30 days in order to process your eligibility.**