

South Carolina Department of Social Services  
**JOBS UPFRONT MEAN MORE PAY (JUMMP)**  
 Complete this form for TANF/Family Independence (FI)

- JUMMP is a program that will help you find a job.
- If you are applying for Family Independence (FI), you may be required to participate in Jobs Upfront Mean More Pay (JUMMP). If you are required to participate in JUMMP and fail to do so, your FI application will be denied **or** your FI case will be closed.
- Once referred, you will be contacted by a JUMMP provider using the contact information you have given on this form. Double check this information for correctness and make sure you give working phone numbers and/or email addresses.
- Your initial JUMMP appointment may last a few hours. **Please make arrangements for child care in advance and do not bring children to the appointment.**

Name: \_\_\_\_\_ Home Phone No.: \_\_\_\_\_ Cell Phone No.: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Preferred contact?  Home No.  Cell  Other No.: \_\_\_\_\_  E-Mail

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| 1. Are there two parents living in the household?  | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| 2. Do you have a child younger than 12 months old?   | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| 3. Are you applying for a child who is not your own?<br>(For example: grandchild, niece/nephew, brother/sister, etc.)                        | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| 4. Are you under 20 years old?<br>a. Do you have a High School Diploma or GED?   | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. Has a doctor told you that you are unable to work due to a medical condition?   | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| 6. Are you required to stay at home to care for an ill family member?  | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| 7. Are you currently receiving any disability benefits such as SSI, Social Security Disability, or VA benefits?                              | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| 8. Were you admitted into U.S. as either a Refugee, Cuban/Haitian, Parolee, or Asylee?   | <input type="checkbox"/> Yes <input type="checkbox"/> No   |
| 9. Are you currently enrolled in a post-secondary educational institution?<br>a. If yes, are you a part-time (PT) or full-time (FT) student? | <input type="checkbox"/> Yes <input type="checkbox"/> No<br><input type="checkbox"/> PT <input type="checkbox"/> FT  |
| 10. Are you currently working?<br>a. If yes, how many hours a week do you work?  | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>_____ hours weekly                                       |
| 11. Are you currently pregnant?<br>a. If yes, how many months pregnant are you?  | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>_____ months pregnant                                    |