

District Direct Mobile Application

How to Submit an Application

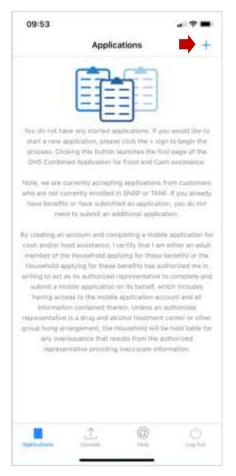
PROCEDURE

How to Submit an Application in the District Direct (Mobile App)

Overview: The following user guide gives an overview on how to submit an application in the District Direct mobile app

STEP-BY-STEP:

- **1.** Log into the District Direct mobile app
- 2. Navigate to the "Applications" screen
- **3.** Click the "+" icon to create a new application



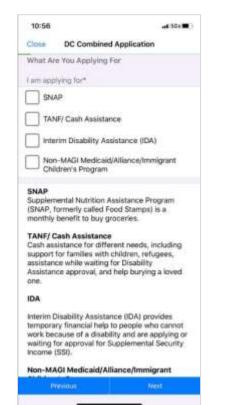
4. Review the "Language Accessibility" screen and note that if you need a Spanish, Amharic, Chinese, or Vietnamese interpreter, you can call ESA at the listed number. Otherwise, click "**Next**"



5. Applicant Information - The Applicant Information section asks for you to provide information such as your name, date of birth, sex, and contact information.

10:49	10:50 HE SON	10:50
Applicant Information	Your Address	Your Address
First name*	Are you experiencing homelessness?	Street (including guadrant)*
John	O Yes	
Middle name	No	Apt.
Last reme*		City
Doe		Washington
Date of birth*		State*
×.		District of Columbia
Sex*		Z3P*
O Male		
O Female		In your mailing address different than your current address?
Telephone*		O Yes
Bnal address*		() No
Ettas applièss.		Do you plan to stay in DC?*
Confirm your email address*		O Yes
Contrast from contraster		O No
Previous result	Previous Prest	Previous Next
		· · · · · · · · · · · · · · · · · · ·

6. What Are You Applying For - The What Are You Applying section asks you to select which programs you are applying for (i.e., SNAP, TANF / Cash Assistance, Interim Disability Assistance (IDA), or Non-MAGI Medicaid / Alliance / Immigrant Children's Program.



7. Your Social Security Number –The next session confirms whether or not you have a social security number. Please note that it is not necessary to provide your social security number but doing so will speed up processing of your application.

10:59 Juli Sci∎). Close DC Combined Application	10:59	10:59 +#Sterm: Close DC Combined Application
Vour Social Security Number Do you have a Social Security Number** Yes No	Your Social Security Number You do not meet to tell un your Social Security Number, however adding your Social Security Number now can speed up processing time for your application. Social Security Number	Your Social Security Number Have you applied for a Social Security Number?* Yes No If No, tell us why you have not applied for an Social Security Number? I'm making my best effort to apply This is for a newborn under age 1 who has not yet received an SSN I'm not eligible for an SSN Other
Province Not	Previous - Nort	Previous - Hort

8. Expedited SNAP (Only Applicable if You are Applying for SNAP)

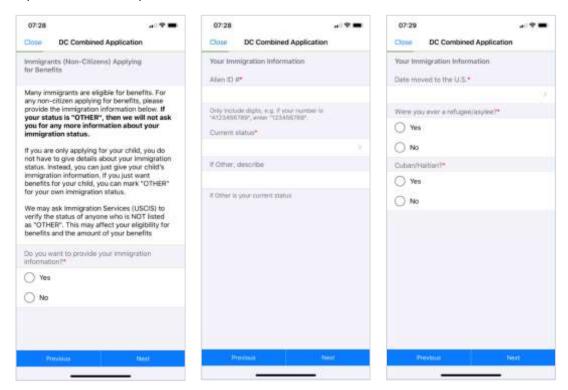
 The Expedited SNAP section only appears if you are applying for SNAP and helps determine if you are eligible to receive SNAP benefits immediately.

16:05	
Close	DC Combined Application
Expedite	d SNAP
than a w	It be able to get SNAP berefits in less sek! To see if you qualify for Expedited or, please tell us:
Will your this mon	household income be more than \$150 m7*
O Yes	
O No	
Do you h the bank	ave more than \$100 in cash or in ?*
O Yes	
O No	
	come & ready cash this month more r rent and utilities?*
O Yes	
O No	
	or anyone in your household a migrant nai farm worker?*
O Yes	
O No	
P	entrus Most

9. Authorized Representatives – The Authorized Representative section allows you to elect an authorized representative to act on your behalf, when needed. By adding an Authorized Representative, you have authorized this person to act on your behalf and to complete and submit a mobile application on your behalf, which includes having access to the mobile application account and all information contained therein. Unless an authorized representative is a drug and alcohol treatment center or other group living arrangement, the Household will be held liable for any over issuance that results from the authorized representative providing inaccurate information.

16:05 •••		
Close	DC Combined Application	
Expedite	d SNAP	
than a w	nt be able to get SNAP benefits in less sek! To see if you qualify for Expedited or, please tell us:	
Will your this mon	household income be more than \$150 th7*	
) Yes		
) No		
Do you h the bank	ave more than \$100 in cash or in .	
) Yes		
O No		
	come & ready cash this month more r rent and utilities ¹⁴	
) Yes		
) No		
Ane you or seaso	or anyone in your household a migrant nai farm worker?*	
) Yes		
No No	1	
	mylout. Next	

10. Immigrants (Non-Citizens) Applying for Benefits – The Immigrants (Non-Citizens) Applying for Benefits section asks for your immigration information. (Please note: This section will only appear if you indicated that you are not a U.S. citizen.



11. Who Lives With You – The Who Lives With You section asks for information regarding any household members including name, date of birth, sex, relation, etc.

10:00 +41:50(C) Close DC Combined Application	18:06 at 19:10
Others in Household You need to include everyone who lives in the beauthold with you, even if you are not applying for benefits for them. Is there another person in	Others in Household (1)
your household?*	Shiddle name
Ves No	Last name*
	is this person applying for benefits?*
	○ No
	Sex*
	O Maler
	C Female
	Date of hirth*
	3
	Social Security Number
	You can leave this blank if this person does not have
President Link	Prevenuer Palent

12. General Questions – The General Questions section asks for general information such as marital status, military status, pregnancy (females only), long-term care, child- or elder-care charges, etc.

07:36 * = Close DC Combined Application	07:59 🕈 🖬	07:59 a 🕈 🖷
Marital Status Are you* Single Married Divorced Separated Wikiowed	Military Or Veteran Is anyone in the military or a U.S. Veteran?* Ves 1 No	Long Term Care Facility Are you in a long-sem care facility (lauch as childrenis residential facility/)* Tes No
Previous Next	Pressue Next	ProviduoNext:

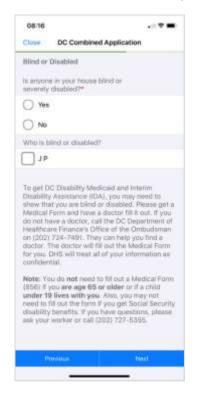
13. Income – The Income section asks questions related to your sources of income include employment, rent payments, and other income.

08-05	06:05 et al T	08:06
Recente From Work R you are self-employed, your employer's name will be your own Are you or is anyone in your house working?* Yes	Other Income Do you or anytoni area gat income from any other sources (such as SSU, Secial Recurry, Child Seport, Unemployment, Veteram Benefits, Ratiniment)?* Ves	Payment For Meals Or Rent Does anyone pay your family for meals or to rent a room (for example, a roommate or boarder)1* Ves No
No	O No	
Personal Hand	Oterman Next	Province Next

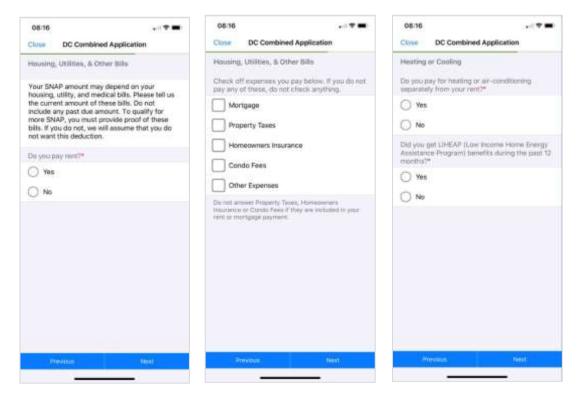
14. Assets – The Assets sections asks questions related your various assets including property, vehicles, stocks, cash, and others.

08:10	08:10	08:10 el 🕈 🖷 Close DC Combined Application
Car Does anyone own a car, truck or van?* No No	Bank Accounts Does anyone have more than \$1,000 in the bank?* Ves No	Life Insurance Does anyone have life insurance that they can cade in? Nes No
	Street, Nee	President Presid

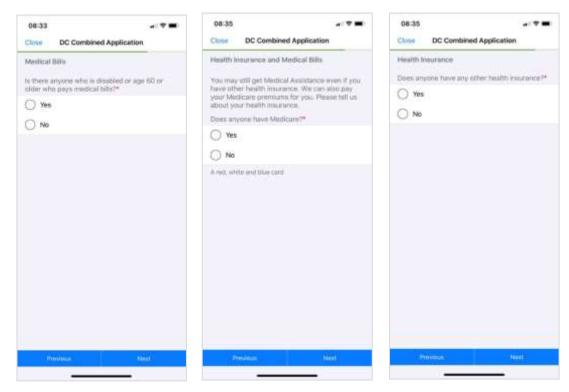
15. For the Blind & Disabled – The "For the Blind & Disabled" section asks if you or anyone in your household is blind or has any other disabilities.



16. Housing, Utilities & Other Bills – The Housing, Utilities & Other Bills section asks questions related to your expenses including housing (e.g., rent), utilities (e.g., gas, electric) and whether or not you received LIHEAP Benefits.



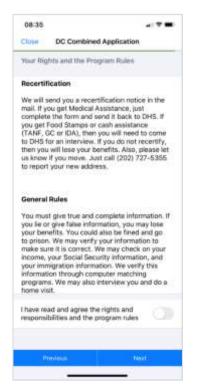
17. Health Insurance & Medical Bills – The Health Insurance & Medical Bills section asks you to provide details related to your health insurance and medical costs.



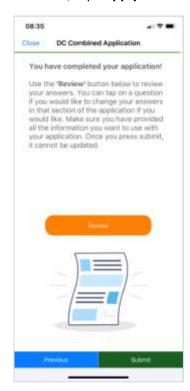
18. Voluntary Questions – The Voluntary Questions section asks demographic questions that you are not required to answer, we only ask for this this information to make sure we do not discriminate.

08:35 Close DC Combined App	a 🐨 🗰	OB:35 Close DC	Combined Application
Voluntary Questions		Language Pref	erence
You may check more than on- not have to provide this infor- information will affect your be- for this information to make a disctiminate.	nation, None of this cells. We only ask	provide service English or service also requires th tenguages that	ige Access Act requires that we e for persons who do not speak of speak English well. The law at we collect information on the our cultomers use. Please owing quarterioris.
Ethnicky*		What is the lars	puope that you usually speak?*
Hispanic/Latino Not Hispanic/Latino Prefer not to answer		C English	
Race*		C French	
Black/African-American		O Vietnames	e
Asian		O Korean	
American Indian or Alask	an Native	O Amhanic	
White		Chinese (I	Aandarin)
Native Hewaiian or Other	Pacific Islander	Chinese (Cantonese)
Prefer not to answer	Conception and a second se	O Other	
		If Other, please	anter the language here
Provident	Next	- Omenia	Next

19. Read your rights and responsibilities and click the arrow to continue. Once you have reviewed, tap to sign and date your application.



20. Before applying, we highly recommend you review your application before you apply by tapping "Review Form". Once you apply, you cannot make changes to your application. After you have reviewed, tap "Apply" to submit your application.



21. Once you have successfully submitted your application, you will see the confirmation screen. To immediately begin uploading your documents, tap "**Upload Documents**".

