[PROGRAM DIRECTOR NAME, TITLE] Phone: [(XXX)-XXX-XXXX]

[NAME OF PROGRAM] Fax: [(XXX)-XXX-XXXX]

[PROGRAM ADDRESS LINE 1]

[PROGRAM ADDRESS LINE 2]

[PROGRAM ADDRESS LINE 3]

[PROGRAM ADDRESS LINE 4]

[DATE]

SUBJECT: Disregard of AmeriCorps Income

To Whom it may concern:

On behalf of the Corporation for National and Community Service (CNCS) and the AmeriCorps affiliate programs, I am writing you on behalf of [MEMBER NAME] who is currently serving as an AmeriCorps Member in the [PROGRAM NAME] and from [DATE RANGE]. In accordance with federal law 42 U.S.C. 5055, an individual serving as an AmeriCorps Member is not considered an employee for purposes of eligibility to receive, or the level of receipt of, assistance or services from your agency.

AmeriCorps Members receive monetary allowances, including a monthly subsistence allowance, during their service. In accordance with 42 U.S.C. 5044, the AmeriCorps living allowance received by the Member (including subsistence allowances) shall not, in any way, reduce or eliminate the level of, or eligibility for public assistance or services (TAF, Medicaid, Child Care subsidy, SSI) that they may be receiving or are eligible to receive under any governmental program.

As an AmeriCorps Member, [MEMBER NAME] receives a monthly living allowance of $[0000.00]. As stated above, this is not considered income. In addition to her/his living allowance, she receives a monthly wage from the district of $[0000.00]. The living allowance and monthly wage is paid on or before the [DATE] every month based on [000] hours of service per week.

This federal statutory provision also known as the “AmeriCorps income disregard provision,” is designed to ensure that persons, and families of persons receiving assistance or services under any federal, state, or local governmental program before entering AmeriCorps service do not lose those benefits, or have those benefits reduced, as a result of their service. This protection of benefits applies to any governmental program, including federal, state and local programs.

If you have any questions, you may contact my office at [(XXX)-XXX-XXXX].

Sincerely,

[PROGRAM DIRECTOR NAME]

[PROGRAM DIRECTOR TITLE]