



The Dish Program at MSC Southeast – Red Wing

Student Benefits

Students enrolled in The Dish program at are eligible to receive additional services while attending MSC Southeast

- Dedicated advisor to help navigate college
- Transportation assistance
- Emergency assistance
- Career Assistance

SNAP Facts

The Supplemental Nutrition Assistance Program (SNAP) offers nutrition assistance to eligible individuals and families.

The goal of the program is to alleviate hunger and malnutrition by increasing food purchasing power for all eligible households.

It supplements food budgets, enabling Minnesotans to buy more nutritious foods.

For a single individual benefits can be as much as \$194 per month.

Already Enrolled in SNAP

Many students who are currently receiving SNAP benefits can enroll in The Dish at MSC Southeast to access the additional resources listed above.

Turn completed applications into:

Melissa Carrington-Irwin | Dean of Students | mirwin@southeastmn.edu |

651-385-6309

Student Affairs, 210G

Goodhue County information on SNAP benefits: www.mn-goodhuecounty.civicplus.com

651-385-3200

SNAP Eligibility

Income and Assets

SNAP eligibility depends on your household's income. Most types of income are counted. There are many deductions from income that are allowed under SNAP. A county worker can give you more information on income limits and deductions.

Monthly Income Guidelines for SNAP

Number of people income before taxes:

1 - \$1755

2 - \$2,371

3 - \$2,987

4 - \$3,603

5 - \$4,219

6 - \$4,835

7 - \$5,451

8 - \$6,067

(For each additional family member above 8 add \$616)

Note: Income guidelines are updated each year. These guidelines are for October 1, 2020 – September 30, 2021.

Benefits

The amount of benefits you get is based on your income, expenses and the number of people in your household. If approved for the program, you will get an Electronic Benefit Transfer (EBT) card. It is like a debit card. Each month, your benefits will be credited to your EBT account.

During this month you use your card to purchase food at stores that display a poster or sign that read: WE ACCEPT EBT. Grocery stores and convenience stores must sell a variety of foods to be approved to accept EBT. The card also may be used at authorized sites for Meals on Wheels and congregate dining. Many farmer's markets also accept EBT.

Apply for SNAP online at: www.applymn.dhs.mn.gov



The Dish Pre-Enrollment Form

Name: _____ **Phone:** _____ **Date:** _____
Address: _____ **City/state/Zip:** _____ **County:** _____
Date of Birth: _____ **Gender:** Male Female Did not self-identify

Student ID Number _____ **Email Address** _____

Ethnicity: (check one)

Did not self-identify Person is Hispanic or Latino Person is not Hispanic or Latino

Race: (choose one or more)

American Indian or Alaska native Asian Black or African American
 Hawaiian Native/Pacific Islander White Did not self-identify

Limited English Proficiency: YES NO

Citizen/Right to Work (check one): Citizen No Right to Work

Labor Force Status: (check one)

Employed full-time (30+ hours/week) Employed part-time (Less than 30 hours/week)
 Employed, received termination notice/military separation) Not Employed, was not self-employed
 Not Employed, was self-employed, farm Not in Labor Force
 Not employed, was self-employed, non-farm employed

Unemployment Insurance Benefits Status: (check one)

Exempt from Work Search Exhaustee Neither claimant nor exhaustee
 Claimant not referred by RESEA or WPRS Claimant referred by RESEA Claimant referred by WPRS

Number of weeks unemployed in last 52? _____

Veteran Status: (check one)

Did not self-identify Not a veteran Spouse or family caregiver of veteran
 Transitioning service member Veteran Veteran <180 days of active services

Education: Highest level of education (check one)

No education grads completed 8th grade education 1 Year College/Tech/Vocational

- | | | |
|--|---|--|
| <input type="checkbox"/> 1 st grade education | <input type="checkbox"/> 9 th grade education | <input type="checkbox"/> 2 Years College/Tech/Vocational |
| <input type="checkbox"/> 2 nd grade education | <input type="checkbox"/> 10 th grade education | <input type="checkbox"/> Associate's Diploma/Degree |
| <input type="checkbox"/> 3 rd grade education | <input type="checkbox"/> 11 th grade education | <input type="checkbox"/> Other Post-Sec Degree/Certification |
| <input type="checkbox"/> 4 th grade education | <input type="checkbox"/> 12 th grade completed, no diploma | <input type="checkbox"/> Post-Sec cert/license (Non-Degree) |
| <input type="checkbox"/> 5 th grade education | <input type="checkbox"/> Certificate of Attendance/Completion | <input type="checkbox"/> 3 Years College/Tech/Voca School |
| <input type="checkbox"/> 6 th grade education | <input type="checkbox"/> High School Diploma | <input type="checkbox"/> Bachelor's Degree or Equivalent |
| <input type="checkbox"/> 7 th grade education | <input type="checkbox"/> GED | <input type="checkbox"/> Beyond the Bachelor's Degree |

Pre-Enrollment Education Status: (check one)

- | | | |
|---|---|--|
| <input type="checkbox"/> Not Attending: HS dropout | <input type="checkbox"/> Not Attending: HS graduate | <input type="checkbox"/> Student, alternative School |
| <input type="checkbox"/> Student, attending Post-HS | <input type="checkbox"/> Student, HS or Less | |

English reading skills grade level:

Math skills grade level:

Family Status: (check one)

- | | | |
|--|--|--|
| <input type="checkbox"/> Not a family member | <input type="checkbox"/> Other family member | <input type="checkbox"/> Parent in one-parent family |
| <input type="checkbox"/> Parent in one-parent family | | |

Family Size:

Number of household members under 18:

Other program participation: (check all that apply)

- | | | |
|--|---|---------------------------------------|
| <input type="checkbox"/> TANF/MFIP Recipient | <input type="checkbox"/> SNAP Recipient | <input type="checkbox"/> GA recipient |
|--|---|---------------------------------------|

Disability Status: (check one)

- | | | | |
|--|---------------------------------------|---|---|
| <input type="checkbox"/> Did not self-identify | <input type="checkbox"/> Not disabled | <input type="checkbox"/> Disability is employment barrier | <input type="checkbox"/> Disability is NOT employment barrier |
|--|---------------------------------------|---|---|

Other information: (check all that apply)

- | | | |
|---|---|--|
| <input type="checkbox"/> Currently homeless | <input type="checkbox"/> Have a criminal record | <input type="checkbox"/> Recovering chemically dependent |
|---|---|--|

To be completed by MSCS:

SNAP eligible verified in MAXIS	YES	NO	Date
ABAWD	YES	NO	Date
MFIB	YES	NO	Date
SNAP 50/50 eligible	YES	NO	Date
Entered in WorkForce One	YES	NO	Date

MSCS Signature: _____ Date: _____