



Applications and Marketing Materials Request Form

Selection	Quantity	Public Benefit Applications and Forms	Language Selection
		JFS-07200 Application for SNAP, Cash, Medical or Child Care	
		JFS-07204 Request to Reapply for Cash Assistance, SNAP and/or Child Care	
		JFS-07221 SNAP Interim Report	
		ODM-07216 Application for Health Coverage & Help Paying Costs (Medical Coverage Only)	English
		Benefit Bridge Application	
		Prevention, Retention and Contingency Application packet	
		Child Care Change Request Form	English
		CJFS Designation of Authorized Representative	
Selection	Quantity	Other Publications	Language Selection
		Benefit Bridge Program flyer	
		Child Care Assistance Frequently Asked Questions flyer	
		Child Care Assistance Overview flyer	
		CJFS Helpful Contact Information flyer	
		Commonly Requested CJFS Verifications flyer	
		Comprehensive Case Management and Employment Program (CCMEP) flyer	
		EBT Card Lock Has Arrived flyer	English
		Prevention, Retention & Contingency (PRC) Program flyer	
		Public Benefits 101 flyer	
		Public Benefit Access Options flyer	
		Medicaid Overview flyer	
		SNAP Employment and Training flyer	
		Text Alert Enrollment flyer	
		Verifications Requested by Assistance Program flyer	

Continued on back



Order Date:

PLEASE DELIVER TO:

Name	
Organization	
Address	
City, State, ZIP	
Phone	
Email	

SEND COMPLETED FORM TO:

Cuyahoga Job and Family Services
Public Benefits & External Relations/Office of Community Engagement
1641 Payne Ave., Room 360
Cleveland, OH 44114

or email to:

community_outreach@jfs.ohio.gov

If additional languages/forms are needed, please list in this area. Please include quantity, application/form/publication name, and language.

Quantity	Application/Form/Publication Name	Language