



	Full Name , have been unemployed since and any source of income.
Last place o	of employment:
Address, Ci	ty, State, Zip:
l am	a) not eligible for unemployment benefits.b) eligible for unemployment benefits but have not received a check.
If not eligible	e, please state reason(s):
My househo	old expenses (food, utilities, etc.) are being paid by:
Full Name:	Phone:
Address, Ci	ty, State, Zip:
residence a	I have declared all members of my household presently residing in my place of nd have provided all sources and amounts of income for all persons living in my o the TVA EnergyRight® Home Uplift Program.
Home Uplift	d that by falsifying the information listed above or provided to the TVA EnergyRight [®] Program may result in the disqualification of my application and eligibility for in the TVA EnergyRight [®] Home Uplift Program.
Applicant S	gnature: Date:
Applicant N	ame (Print):
	RETURN SIGNED, COMPLETED FORM TO:
Home U	plift Program: P.O. Box 290189 Nashville, TN 371229 or Email: support@mytva.com
For comple	etion by Home Uplift Program Staff:

Validated By: _____ Date: ____