

Guidelines for Children & Youth Temporary Financial Assistance (TFA)

Eligibility for Temporary Financial Assistance is limited to minor children of veterans. The parent must have served at least one day of active duty in the Armed Forces of the United States during one of the following periods:

- December 7, 1941 — December 31, 1946
- June 25, 1950 — January 31, 1955
- February 28, 1961 — May 7, 1975
- August 24, 1982 — July 31, 1984
- December 20, 1989 — January 31, 1990
- August 2, 1990 — Cessation of hostilities as determined by the U.S. Government.

MEMBERSHIP IN THE AMERICAN LEGION OR AUXILIARY IS NOT REQUIRED.

Minor children include any unmarried child, stepchild, and adopted child 17 years or younger. Children 18 – 20 years old will be considered if a current disability requires special schooling or indefinite in-home care, or they are enrolled in an approved high school.

No child is considered eligible for TFA until a complete investigation is conducted, a legitimate family need is determined, and all other available resources have been utilized or exhausted. TFA applications must originate and be investigated at the local level. When all other possible resources have been exhausted, contact your local American Legion Auxiliary Unit.

How TFA Helps Children

TFA is specifically designed to assist minor children of eligible veterans through cash grants. In order to maintain a stable home environment for the child or children, grants are awarded to help families meet the costs of shelter, utilities, food, and medical expenses.

Maintenance Grants

Maintenance grants may be used to assist with the basic need expenses such as:

- Shelter
- Utilities
- Food
- Clothing

Maintenance grants can't be awarded for previously incurred debt, except to:

1. Prevent disconnection of utilities
2. Prevent eviction or foreclosure.

Medical Grants

Medical grants for a child may be used to assist with healthcare expenses such as:

- Medical Care
- Dental Care
- Surgery
- Hospitalization
- Medications
- Dietary Needs

Medical grants require a written statement from a physician outlining the problem, treatment, and estimated costs. This type of grant must be approved before services are rendered. Medical grants can't be awarded for previous medical expenses or care.

Application Process

All TFA applications originate at the local Unit level. The Unit when possible shall make a contribution to the family with funds and/or services, contacting community resources before applying to the Department for assistance. Department Funds shall not reimburse the Unit for money spent prior to the date of application, except as provided in The American Legion National Children and Youth Brochure for Temporary Financial Assistance.

A local investigator personally visits with the family to determine the needs of the children. A completed application, with supporting documents and proof of military service, is forwarded to the American Legion Auxiliary Department Children & Youth Chairman. The Department Children & Youth Chairman reviews each case, and approves the amount that is authorized based upon the needs in the application and forwards the approved application and amount to the Department Headquarters where a check will be issued and will be mailed directly to the American Legion Auxiliary Unit Children & Youth Chairman or Unit President.

All assistance checks shall be made payable to the Unit Chairman and she shall pay whatever expenses are required to meet the financial needs of the veteran and his family. Under no circumstances shall funds be disbursed directly to applicant or his family. In the absence of the Unit Children & Youth Chairman, the Unit President will be responsible. A case number shall be assigned and reported keeping the name confidential. When unusual circumstances require additional assistance for a period over two months, the Department Chairman must have the written approval of the Department President and the Chairman of the Department Finance Committee before granting an extension.

Consideration for additional assistance shall not be given unless the receipt form and receipts for the issued check and expenditures and the monthly review form have been received and approved by the Department Chairman. The receipt form shall be completed and signed by an adult member of the family receiving aid as soon as the funds have been administered or within thirty (30) days after receipt of the funds. Funds provided to a Unit for family aid must be used exclusively for that family. All funds not expended must be returned to the Department Chairman.



AMERICAN LEGION AUXILIARY
Department of California
Children and Youth
Temporary Financial Assistance
Guidelines

FORM
C & Y - TFA
Internet
3 of 4

Name of Veteran Parent _____
 Address _____
 City, State, Zip _____
 Condition of Health _____
 Date of Hospitalization _____ Name of Hospital _____
 If deceased, date/place of death _____
 Serial Number _____ Claim Number _____
 Mustered in _____ Date _____
 Discharged _____ Date _____
 American Legion Post Name and Number _____
 Other organizations _____
 Name of Second Parent _____
 Address _____
 Condition of Health _____
 AL/ALA/Post/Unit Name and Number _____

Names of Dependent children (use back if necessary)	Sex	Date of Birth	Condition of Health
1.			
2.			
3.			
4.			
5.			

Are children receiving proper care and supervision in home? _____
 How long has the family resided in the state? _____ Country? _____
 What effort has been made to secure benefits that may be available through Federal, State, County or Community aid?
 Give details on Signature Sheet to follow.

Sources of Present Income		Estimated Monthly Need	
Government Compensation	\$	Rent	\$
Disability Allowance	\$	Food	\$
From Earnings	\$	Clothing	\$
From Relatives	\$	Utilities	\$
State Aid	\$	Other	\$
County Aid	\$		\$
Red Cross	\$		\$
Community Agencies	\$		\$
American Legion Post/Unit	\$		\$
Miscellaneous	\$		\$

The above information about the sources of present income is a true statement of facts.

Signature of Applicant _____



AMERICAN LEGION AUXILIARY
Department of California
Children and Youth
Temporary Financial Assistance
Guidelines

FORM
C & Y - TFA
Internet
4 of 4

Use this area for additional remarks and recommendations.

Case Reported by _____

Date of Application _____

Unit Name and Number _____

Signature of Unit Children & Youth Chairman _____ Date _____

Print Name of Unit Children & Youth Chairman _____

Address _____

Phone Number _____

Signature of Unit President _____ Date _____

Signature of Department Children & Youth Chairman _____ Date _____