

**A RESOLUTION AMENDING POLICY GUIDELINES  
FOR THE EMERGENCY TEMPORARY FAMILY ASSISTANCE PROGRAM**

**WHEREAS**, Section 2-225 – Duties generally, of the City Code provides that the City Council shall establish a policy to govern the Emergency Temporary Family Assistance Program, which shall be administered by the City Manager, or his/her designee, in a manner which is consistent with that policy.

**NOW, THEREFORE, BE IT RESOLVED** by the City Council of the City of Rolling Meadows, Illinois, that the Annual Budget for Fiscal Year 2020 for the City of Rolling Meadows, Cook County, Illinois, be amended by transferring reserves from the General Fund in the amount of \$15,000 as an additional contribution for the Emergency Temporary Family Assistance Program, resulting in a total amount allocated to the Program of \$20,000.

YEAS: Budmats, Vinezeano, Bisesi, Sanoica

NAYS: Cannon, O'Brien, D'Astice

ABSENT: 0

This Resolution has failed for lack of a 2/3rds vote of the corporate authorities.

**NOW, THEREFORE, BE IT RESOLVED** by the City Council of the City of Rolling Meadows, Illinois, that the City Council hereby adopts the "Policy Guidelines - Emergency Temporary Family Assistance Program", as amended, and attached hereto and made a part hereof.

YEAS: Budmats, O'Brien, Vinezeano, Bisesi, Sanoica

NAYS: D'Astice, Cannon

ABSENT: 0

This Resolution has been adopted.

Passed and Approved this 9<sup>th</sup> day of June 9, 2020

  
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Joe Galfo, Mayor

ATTEST:

  
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Judith Brose, Deputy City Clerk

## **Policy Guidelines – Emergency Temporary Family Assistance Program – June 9, 2020**

**Program Goal** – To provide financial and other forms of assistance to residents of Rolling Meadows who are experiencing a temporary welfare emergency due to insolvency. For the purpose of this program, an Applicant is someone who is a United States Citizen or a lawfully present non-citizen as set forth in Section 5/1-11 of the Illinois Public Aid Code, and has maintained their principal domicile within the corporate limits of the City of Rolling Meadows for a continuous period of six (6) months immediately preceding the request for assistance. This continuous period shall be waived and is not applicable during any state of emergency as declared by the City Council.

### **Applicants for assistance would have to certify and/or prove:**

- They are residents of Rolling Meadows as evidenced by a driver's license, voter registration, property lease, mortgage or other recognized source;
- They have not received assistance from the City's Emergency Temporary Family Assistance Program within the past 12 months; and
- They do not have readily convertible assets to meet the request for financial assistance and can provide specific evidence of bank balances, proof of income, and other statements to verify financial condition.
- They have not been convicted of any drug-related felony.

Deviations from these criteria would have to be approved by the City Manager, or designee.

### **Categories for Financial Assistance:**

**Housing:** Payment of monthly rent or a mortgage obligation, where such assistance will forestall an imminent foreclosure or eviction proceeding (as evidenced by a landlord's 10-day notice or circuit court action), or address homelessness associated with fire or other adversity. *The maximum benefit for this category would be \$1500.*

**Utilities:** Assistance would be available to prevent disconnection of heat, light or water service. Applicants must present final notice of discontinuation. *The maximum benefit in this category would be \$200.*

**Food/Medicine Assistance:** This program provides assistance to purchase food or medicines to persons who are not yet receiving benefits from other agencies. *The maximum benefit under this category is \$200.*

**Miscellaneous Category:**

Assistance available where the applicant can demonstrate inability to pay. The maximum benefit under this category is \$200. Any combination of assistance for areas listed below would not exceed \$500 in any given calendar year.

**Telephone** – where discontinuation of service is threatened and where loss of the use of the telephone service could impair the health and welfare of the applicant and/or dependents.

**Child Care** – where emergency conditions arise which prohibit a parent, guardian or other family member from providing care for minors for a short-term situation.

**Transportation** – where the applicant does not have access to private, public or other transportation to meet essential needs, such as visits to a doctor for treatment.

**Medical/Dental bills** – where immediate treatment of an ailment is required to preserve the health and well-being of an applicant and/or dependent.

**Clothing** – where the applicant does not have access to proper clothing for themselves and/or dependents to provide for essential protection.

**Residence Improvement** – where repairs are needed to alleviate an imminent threat to the health and welfare of the resident.