

SUMMER TRANSITION PROGRAM FAMILY: HOW TO APPLY FOR CAPS





6 SUCCESSFUL PRE-SCREENER

If you do not receive the following message "Based on the information provided, you meet application submission requirements for the CAPS scholarship. Please click Next to continue with the rest of the application", notify your provider.



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<u>COMPLETE APPLICATION &</u> <u>SUBMIT DOCUMENTS</u>

• Upload documents to verify the following:

- o Georgia Residency
- Child's Age & Citizenship
- o Immunization
- Parent Identity
- Activity
- o Income

8 SIGN APPLICATION

Sign your application electronically

I understand that an electron	ic signature has the same legal effect	I and can be enforced in the same v	iay as a written signat
First Name	Middle Initial	Last Name	Suffix

SUBMIT APPLICATION

Submit your application

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I have agreed to submit this appl are true and accurate to the best also certify that:	cation for myself and/or my fa of my knowledge, including in	amily. By signing this application e nformation provided about the citiz	ectronically, I certify under penalty o enship or immigration status for eacl	f perjury and false swearing that my a h household member applying for ber
I agree to submit this change by in the same ways as a written sig	electronic means. By signing t nature.	this change electronically, I under	tand that an electronic signature has	s the same legal effect and can be er
I understand the questions and s	tatements on this application.			
I have read and understand my F	lights & Responsibilities in the	e box above.		
I understand the penalties for giv	ing false information or break	ing the rules.		
I understand that the agency may	contact other persons or org	anizations to obtain needed proof	of my eligibility and level of benefits.	
I understand I can be punished b	y law if I do not tell the compl	ete truth.		
• 🗱 By checking this box and h	ping my name below; I am el	ectronically signing my application		
*First Name:	Middle Initial :	*Last Name:	Suffix :	



11 NOTIFY YOUR TRANSITION COACH

IMPORTANT:

- Let your Transition Coach know you have applied for CAPS
- Give your provider the "Tracking Number" for your application.

	Congratulations! Your application has been successfully
-Keep Track	Keep in mind that your worker may ask for proof of some of the things you tool us in your application. Write created a list of the hypes of proof had you may meet opcreate. If an interview is required or additional information is needed, the agency may get in touch with you. Click the Types of Proof builton to see and point this isit.
The tr	acking number for your application is T16140755. Be sure to write this number down or print this page for your records.
You m 423-4	vary check the status of your application online; by clicking the "Login" button on the Home page. You may also get information by calling 1-877- 746.
The a inform	gency will notify of the outcome of your application. If you give the agency your application tracking number, the agency can give you ation more guickly.
if you	have submitted your application after Spm, the agency will receive it the next business day.