

### Apply for the Lifeline Program Online

Lifeline is a federal program that lowers the monthly cost of phone or internet service.

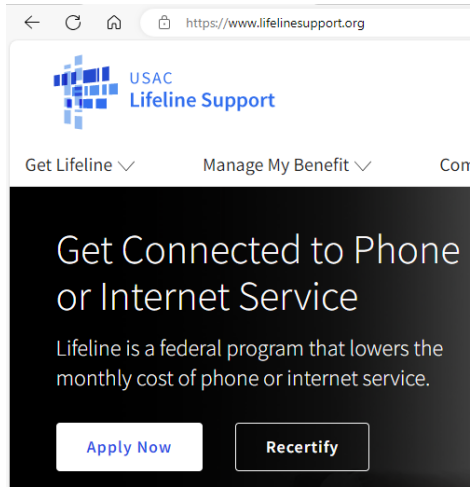
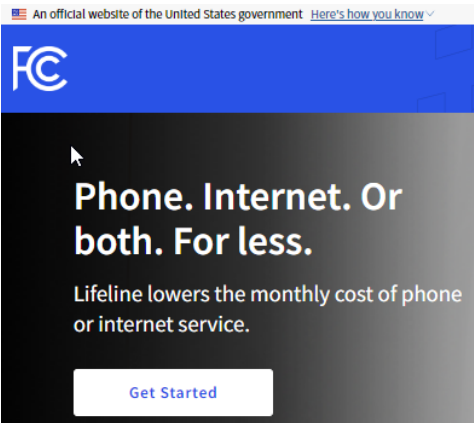
If your household is eligible, you can receive:

- Up to \$9.25/month on your phone, internet, or bundled service, or
- Up to \$34.25/month if you live on qualifying Tribal lands.

### What to do next

Follow the steps below to submit a Lifeline application online. This typically takes about 10 minutes to complete. You may need to provide additional information or documentation to confirm your eligibility, identity, or home address.

If you have questions during the application process, contact the Lifeline Support Center by email at [LifelineSupport@usac.org](mailto:LifelineSupport@usac.org) or call (800) 234-9473 from 9 a.m. to 9 p.m. ET.



	Follow these steps to apply online	What the steps look like
1	<p>Tap or click on the web browser on your mobile device or desktop computer.</p> <ul style="list-style-type: none"> <li>• Enter <a href="https://www.lifelinesupport.org">LifelineSupport.org</a> in the web address bar and tap <b>Go/Search</b> on your mobile device or <b>Enter</b> on the keyboard.</li> <li>• Then, tap or click <b>Apply Now</b>.</li> </ul>	 <p>The screenshot shows the website's main page with the USAC Lifeline Support logo, navigation links, and a large banner that says 'Get Connected to Phone or Internet Service' with 'Apply Now' and 'Recertify' buttons.</p>
2	<p>Tap or click <b>Get Started</b> to start your application.</p>	 <p>The screenshot shows a banner with the FCC logo and the text 'Phone. Internet. Or both. For less.' with a 'Get Started' button.</p>

3	<p>Fill out your first and last name as it appears on your official documents, like a Social Security Card or State ID.</p>	<p><b>What is your full legal name?</b> The name you use on official documents, like your Social Security Card or State ID. Not a nickname.</p> <p><b>First Name</b> <input type="text"/></p> <p><b>Middle Name (Optional)</b> <input type="text"/></p> <p><b>Last Name(s)</b> If you have multiple last names put them all into the box below. <input type="text"/></p>
4	<p>Fill out your date of birth.</p> <ul style="list-style-type: none"> <li>Enter the month.</li> <li>Enter the day.</li> <li>Enter the year.</li> </ul>	<p><b>What is your date of birth?</b></p> <p><b>Month</b> <input type="text" value="MM"/> <b>Day</b> <input type="text" value="DD"/> <b>Year</b> <input type="text" value="YYYY"/></p>
5	<p>Do you want us to check your identity with the last four digits of your Social Security Number?</p> <ul style="list-style-type: none"> <li>If yes, enter the last four digits of your Social Security Number.</li> <li>If no, select the Number on Tribal ID option and enter your Tribal identification number.</li> </ul>	<p><b>How do you want us to check your identity?</b> We'll use this information to see if you're eligible. It won't affect your credit status.</p> <p><input checked="" type="radio"/> <b>Social Security Number (SSN)</b> This is the fastest option if you know the last 4 digits of your SSN.</p> <p><b>Enter last 4 digits of your SSN</b> XXX - XX - <input type="text"/></p> <p>This is required if you're applying for Lifeline.</p> <p><input type="radio"/> <b>Number on Tribal ID</b> Look for this number on your card or documentation.</p>
6	<p>Fill out your home address.</p> <ul style="list-style-type: none"> <li>This <b>cannot</b> be a PO Box.</li> </ul>	<p><b>What is your home address?</b> The address where you will get service. Do not use a P.O. Box. You will be able to add a mailing address later.</p> <p><b>Street Number and Name</b> <input type="text" value="123 Street Road"/> <b>Apt, Unit, etc.</b> <input type="text"/></p> <p><b>City</b> <input type="text" value="Your City or Town"/> <b>State</b> <input type="text" value="Choose"/> <b>Zip Code</b> <input type="text" value="00000"/></p>

7	<p>Do you qualify for Lifeline through a child or dependent?</p> <ul style="list-style-type: none"> <li>• If no, tap or click <b>Next</b>. <ul style="list-style-type: none"> <li>○ Go to <a href="#">step 8</a> to continue.</li> </ul> </li> <li>• If yes, tap or click <b>Yes</b>, then select <b>Next</b>. <ul style="list-style-type: none"> <li>○ Go to <a href="#">step 7a</a> if you qualify through a child or dependent.</li> </ul> </li> </ul>	<p>Do you qualify for Lifeline or the <a href="#">Affordable Connectivity Benefit</a> through your child or a dependent?</p> <p>If you do not qualify on your own, you can sign up for Lifeline or the <a href="#">Affordable Connectivity Benefit</a> through your child or dependent if they participate in any of the qualifying programs.</p> <p><input checked="" type="radio"/> No, I qualify by myself.</p> <p><input type="radio"/> Yes, I qualify through my child or dependent.</p> <p style="text-align: right;"><b>Next</b></p>
7a	<p>Fill out your child or dependent's information.</p> <p>You'll need to:</p> <ul style="list-style-type: none"> <li>• Fill out their first and last name.</li> <li>• Fill out their date of birth.</li> <li>• Verify their identity by using the last four digits of their Social Security Number or a Tribal ID number.</li> <li>• Tap or click <b>Next</b>. <ul style="list-style-type: none"> <li>○ Go to <a href="#">step 8</a> to continue.</li> </ul> </li> </ul>	<p>What is their full legal name?</p> <p>The name you use on official documents, like your Social Security Card or State ID. Not a nickname.</p> <p><b>First Name</b> <span style="float: right;"><b>Middle Name</b> (Optional)</span></p> <p><input type="text"/> <span style="float: right;"><input type="text"/></span></p> <p><b>Last Name(s)</b></p> <p>If they have multiple last names put them all into the box below.</p> <p><input type="text"/></p> <hr/> <p>What is their date of birth?</p> <p><b>Month</b> <b>Day</b> <b>Year</b></p> <p><input type="text"/> MM <input type="text"/> DD <input type="text"/> YYYY</p> <hr/> <p>How do you want us to check their identity?</p> <p>We'll use this information to see if they're eligible. It won't affect their credit status.</p> <p><input checked="" type="radio"/> <b>Social Security Number (SSN)</b></p> <p>This is the fastest option if you know the last 4 digits of their SSN.</p> <p>Enter last 4 digits of their SSN</p> <p>XXX - XX - <input type="text"/></p> <hr/> <p><input type="radio"/> <b>Number on Tribal ID</b></p> <p>Look for this number on their card or documentation.</p> <p style="text-align: right;"><b>Back</b> <span style="float: right;"><b>Next</b></span></p>

<p>8</p>	<p>Create an account to save your information and continue your application.</p> <ul style="list-style-type: none"> <li>• Enter a username. It can be an email address or a unique ID.</li> <li>• Enter a password that is a mix of letters, numbers, and symbols.</li> <li>• Type the same password again.</li> </ul>	<div style="border: 1px solid #ccc; padding: 10px;"> <p><b>Choose your username.</b></p> <p>Choose something you can easily remember like your email address or your name in some form. Save this information somewhere secure because you will need to use it again.</p> <p><b>Username</b></p> <input type="text"/> </div> <hr/> <div style="border: 1px solid #ccc; padding: 10px;"> <p><b>Choose your password.</b></p> <p>Make sure it is something you can remember. Save this information somewhere secure because you will need to use it again.</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><b>Password Requirements</b></p> <ul style="list-style-type: none"> <li>ⓘ At least 8 characters long</li> <li>ⓘ At least 1 capital letter</li> <li>ⓘ At least 1 number (0-9)</li> <li>ⓘ At least 1 special character (!@#%&amp;*)</li> <li>ⓘ No restricted phrases ?</li> </ul> </div> <div style="width: 45%;"> <p><b>Password</b></p> <input type="password"/> <p><input type="checkbox"/> Show Password</p> <p><b>Confirm Password</b></p> <p>Type the same password again.</p> <input type="password"/> <p><input type="checkbox"/> Show Password</p> </div> </div> </div>
<p>9</p>	<p>Fill out your contact information.</p> <ul style="list-style-type: none"> <li>• Enter your email address. <ul style="list-style-type: none"> <li>○ Notifications about your application will go to the email address you share.</li> </ul> </li> <li>• Enter your phone number (optional).</li> <li>• Tap or click the checkbox to enter a mailing address if different from your home address. <ul style="list-style-type: none"> <li>○ This can be a PO Box.</li> </ul> </li> </ul>	<div style="border: 1px solid #ccc; padding: 10px;"> <p><b>Your Contact Information</b></p> <p><b>What is your email address?</b></p> <p>We will use your email to send you important reminders and information about your application and enrollment.</p> <input type="text" value="example@email.com"/> <p><input type="checkbox"/> I want to provide an alternate email.</p> <hr/> <p><b>What is your phone number? (Optional)</b></p> <input style="width: 100px;" type="text" value="( ) - "/> <p>By providing a phone number, you consent to letting USAC contact you at that phone number via artificial or prerecorded voice message or text for important reminders and updates about your Lifeline or ACP benefit. For text messages, message and data rates may apply. Text STOP to end messages.</p> <hr/> <p><b>Do you want to provide a mailing address?</b></p> <p><input type="checkbox"/> Yes, my mailing address is different than home address</p> </div>

10	<p>Tell us your preferred language (optional).</p> <ul style="list-style-type: none"> <li>• Tap or click <b>English, Spanish, or Both.</b></li> </ul>	<p><b>What is your preferred language? (Optional)</b></p> <p>We will send outreach to you about your Lifeline or ACP benefit in the language(s) you select. You may select more than one language.</p> <p> <input type="radio"/> English  <input type="radio"/> Español  <input type="radio"/> Both         </p>
11	<p>Review the terms and conditions.</p> <ul style="list-style-type: none"> <li>• Tap or click the checkbox to confirm you accept.</li> <li>• Tap or click <b>Submit.</b></li> </ul>	<p><b>Terms &amp; Conditions</b></p> <p><input type="checkbox"/> By checking this box, I accept the <a href="#">terms and conditions</a> of the National Verifier system.</p> <p> <input type="button" value="Back"/> <input type="button" value="Submit"/> </p>
12	<p>Tap or click <b>Start Lifeline Application</b> to continue filling out your application.</p>	<p><b>My Applications</b></p> <p>Here are all your applications from the last 180 days. You can start a new application when your last one expires.</p> <p> <input type="button" value="Return to Application"/> <input type="button" value="Start Lifeline Application"/> </p>
13	<p>Tell us how you qualify.</p> <ul style="list-style-type: none"> <li>• Tap or click the checkbox next to all that apply.</li> <li>• Tap or click <b>Next.</b></li> </ul>	<p><b>Confirm your program participation</b></p> <p><b>Which of the following programs do you participate in?</b></p> <p><b>Check all that apply.</b></p> <p> <input type="checkbox"/> SNAP (Supplemental Nutrition Assistance Program) or Food Stamps ⓘ  <input type="checkbox"/> Medicaid  <input type="checkbox"/> Supplemental Security Income (SSI)  <input type="checkbox"/> Federal Housing Assistance ⓘ  <input type="checkbox"/> Veterans Pension and Survivors Benefit Programs  <input type="checkbox"/> Tribal Specific Program (only choose if you live on Tribal lands)  <input type="checkbox"/> I don't think I participate in any of these programs, I may qualify through my <b>income</b>.  <input type="checkbox"/> I don't participate in any of these, but I have a <b>child or dependent</b> who may. ⓘ         </p> <p> <input type="button" value="Back"/> <input type="button" value="Next"/> </p>

<p>14</p>	<p>Review your information.</p> <ul style="list-style-type: none"> <li>• If you need to correct your information, tap or click  <b>Edit</b> and make any updates.</li> <li>• Review the consent statement and tap or click the checkbox to confirm we can use your information to check if you are eligible.</li> <li>• Tap or click <b>Submit</b>. <ul style="list-style-type: none"> <li>○ It may take a few minutes to check your information.</li> </ul> </li> </ul>	<h3>Review Your Information</h3> <p>Before we check if you qualify for Lifeline, make sure your information is right.</p> <p>Double check the information below.</p> <div data-bbox="927 485 1487 663" style="border: 1px solid #ccc; padding: 10px;"> <p>Full Legal Name: <b>Test John</b> <span style="float: right;"> Edit</span></p> <p>Date of Birth: <b>January 01, 1980</b></p> <p>Last 4 Numbers of SSN: <b>3333</b></p> <p>Address: <b>123 NOT REAL ROAD TOWN, DC 11111</b></p> </div> <p>The information you gave us will be used to check if you qualify for Lifeline. Please confirm that it is okay.</p> <p><input type="checkbox"/> By checking this box you are consenting that all of the information you are providing may be collected, used, shared, and retained for the purposes of applying for and/or receiving Lifeline.</p> <p style="text-align: center;"> <span style="border: 1px solid #ccc; padding: 5px 15px;">Back</span> <span style="float: right; background-color: #007bff; color: white; padding: 5px 15px; border-radius: 4px;">Submit</span> </p>
<p>15</p>	<p>You'll find out right away if you qualify to get a benefit or if we need more information.</p> <p>Did we ask you to share more information?</p> <ul style="list-style-type: none"> <li>• <b>If yes</b>, tap or click <b>Next</b> and go to the <a href="#">Show You Qualify</a> section.</li> <li>• <b>If no</b>, tap or click <b>Next</b> and go to <a href="#">step 16</a>.</li> </ul>	<h3>We need more information to see if you qualify</h3> <p>A few things happened:</p> <ul style="list-style-type: none"> <li>• We couldn't find your address; please show us where you live on a map.</li> <li>• Someone at your address already gets the Lifeline benefit; please answer some questions about your living situation to find out if you're eligible.</li> <li>• We couldn't verify who you are; please attach a photo of a document that shows your identity information.</li> <li>• We couldn't confirm your eligibility; please attach a photo of a document that shows you (or your child or dependent) participate in a government assistance program or your income.</li> </ul> <p><b>What to do next</b></p> <p>You need to provide additional information in order to qualify for the Lifeline program.</p> <p style="text-align: right;"><span style="background-color: #007bff; color: white; padding: 5px 15px; border-radius: 4px;">Next</span></p>


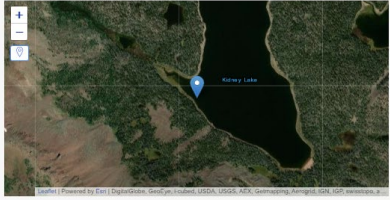
<p>16</p>	<p>Read each statement and enter your initials.</p>	<p>I agree, under penalty of perjury, to the following statements:</p> <p><b>Initial</b> <input type="checkbox"/> I (or my dependent or other person in my household) currently get benefits from the government program(s) listed on this form or my annual household income is 135% or less than the Federal Poverty Guidelines (the amount listed in the Federal Poverty Guidelines table on this form).</p> <p><b>Initial</b> <input type="checkbox"/> I agree that <b>if I move I will give my service provider my new address</b> within 30 days.</p> <p><b>Initial</b> <input type="checkbox"/> I understand that I have to tell my service provider within 30 days if I do not qualify for Lifeline anymore, including:</p> <ol style="list-style-type: none"> <li>1. I, or the person in my household that qualifies, do not qualify through a government program or income anymore.</li> <li>2. Either I or someone in my household gets more than one Lifeline benefit (including, more than one Lifeline broadband internet service, more than one Lifeline telephone service, or both Lifeline telephone and Lifeline broadband internet services).</li> </ol> <p><b>Initial</b> <input type="checkbox"/> I know that <b>my household can only get one Lifeline benefit</b> and, to the best of my knowledge, my household is not getting more than one Lifeline benefit. <a href="#">?</a></p> <p><b>Initial</b> <input type="checkbox"/> I agree that all of the information I provide on this form may be collected, used, shared, and retained for the purposes of applying for and/or receiving the Lifeline Program benefit. I understand that if this information is not provided to the Lifeline Program Administrator, I will not be able to get Lifeline benefits. If the laws of my state or Tribal government require it, I agree that the state or Tribal government may share information about my benefits for a qualifying program with the Lifeline Program Administrator. The information shared by the state or Tribal government will be used only to help find out if I can get a Lifeline Program benefit.</p> <p><b>Initial</b> <input type="checkbox"/> <b>All the answers and agreements that I provided on this form are true and correct</b> to the best of my knowledge.</p> <p><b>Initial</b> <input type="checkbox"/> I know that <b>willingly giving false or fraudulent information to get Lifeline Program benefits is punishable by law</b> and can result in fines, jail time, de-enrollment, or being barred from the program.</p> <p><b>Initial</b> <input type="checkbox"/> My service provider may have to check whether I still qualify at any time. <b>If I need to recertify my Lifeline benefit, I understand that I have to respond by the deadline</b> or I will be removed from the Lifeline Program and my Lifeline benefit will stop.</p> <p><b>Initial</b> <input type="checkbox"/> If I am seeking to qualify for Lifeline as an eligible resident of Tribal lands, I live on Tribal lands, as defined in 54.400(e) of the Lifeline rules. <a href="#">?</a></p>
<p>17</p>	<p>Finish your application.</p> <ul style="list-style-type: none"> <li>• Enter your first and last name.</li> <li>• Tap or click the checkbox to confirm you understand this is a digital signature.</li> <li>• Tap or click <b>Submit</b>.</li> </ul>	<p><b>Your Signature</b></p> <p>Type your full legal name below</p> <p>Test John</p> <p><input type="text"/></p> <p><input type="checkbox"/> I understand this is a digital signature, and is the same as if I signed my name with a pen.</p> <p><a href="#">Back</a> <a href="#">Submit</a></p>

18	<p>Your application is approved!</p> <ul style="list-style-type: none"> <li>• <a href="#">Contact a participating phone or internet company</a> to get your benefit.</li> <li>• Sign up by the deadline or you'll need to re-apply.</li> </ul>	<h3>Contact a phone or internet company to get your benefit</h3> <p>You're approved to get your Lifeline benefit. <b>Sign up by November 6, 2024.</b></p> <div data-bbox="940 489 1474 726" style="background-color: #f0f0f0; padding: 10px;"> <p><b>What to do next</b></p> <p><b>If you already have service</b></p> <p>Contact your phone or internet company and say, "I have been approved for the Lifeline program and would like to apply it to my service."</p> <p><b>If you don't currently have service</b></p> <p><a href="#">Find a phone or internet company</a> in your area and say, "I have been approved for the Lifeline program and would like to sign up for service."</p> </div> <div data-bbox="1032 758 1382 1024" style="border: 1px solid #ccc; padding: 10px; margin-top: 10px;"> <p>Application ID: <b>Q90774-69740</b></p> <p>Full legal name <b>Test John</b></p> <p>Address: <b>123 Not Real Road, Town, DC 11111</b></p> <p>Method of identity verification: <b>Last 4 digits of SSN</b></p> </div>
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## Show you qualify

This section shows what you'll need to do if we ask you to share more information or documentation to confirm your eligibility, identity, or address. For more information, review our Acceptable Documentation Guide (available in [English](#) and [Spanish](#)).

What to do if you need to show us	What the steps look like
<p><a href="#">Proof of your address</a></p> <p>You may be asked to confirm your address by locating where you live on the map.</p> <p>Show us where you live.</p> <ul style="list-style-type: none"> <li>• Tap or click on the map to move the pin to your address, or use the (+) button to zoom in.</li> <li>• Tap or click on the pin once you have found your address on the map.</li> <li>• Tap or click <b>Next</b>.</li> </ul>	<p><a href="#">Find your address on the map below</a></p> <p>We couldn't find your address, please show us where you live on the map.</p> <p>• Your address 123 NOT REAL ROAD TOWN, DC 11111</p> <div data-bbox="1003 793 1422 1306"> <p><b>How to find your address on the map</b></p> <p>To show us where you live, click on the map to move the pin to your address. The pin will automatically fill in the longitude and latitude coordinates of your address.</p>   <p>Latitude <input type="text"/></p> <p>Longitude <input type="text"/></p> <p><a href="#">Back</a> <a href="#">Next</a></p> </div>
<p><a href="#">Proof of your household</a></p> <p>You may be asked to confirm if your household qualifies for the Lifeline benefit.</p> <p>Only one monthly benefit is allowed per household. A household is a group of people who live together and share money, even if they are not related to each other.</p> <ul style="list-style-type: none"> <li>• Answer the questions.</li> <li>• Tap or click <b>Next</b>.</li> </ul>	<p><a href="#">Someone at Your Address Already Gets Lifeline or the Affordable Connectivity Benefit</a></p> <p>We need more information to determine whether you qualify for Lifeline or the Affordable Connectivity Benefit.</p> <div data-bbox="1013 1541 1412 1776"> <p><b>Do you share money (income and expenses) with another adult who gets Lifeline or the Affordable Connectivity Benefit?</b></p> <p>This can be the cost of bills, food, etc., and income. If your spouse receives Lifeline or the Affordable Connectivity Benefit, please answer "Yes" to this question.</p> <p><input type="radio"/> Yes <input type="radio"/> No</p> <p><small>Note: Select "no" if you <u>do not</u> share money (income and expenses) with another adult who already participates in the program(s) you are applying for. (Example: if you are only seeking to receive the Affordable Connectivity Benefit, and you are sharing income/expenses with another adult who already receives Lifeline, select "no.")</small></p> </div> <p>You will have until 9/21/2024 to complete this section so we can determine whether you qualify for Lifeline or the Affordable Connectivity Benefit. If you do not complete this by then, you will need to come back to this site and fill this form out again.</p> <p><a href="#">Back</a> <a href="#">Next</a></p>

### Proof of your Social Security Number

You may be asked to share a document to confirm your Social Security Number.

- Share a document that includes:
  1. Your first and last name,
  2. The last four digits of your Social Security Number.
- Tap or click **Take a photo** or **Choose a file** to attach a photo or copy of the document.
- Tap or click **Next**.

### Share proof of your Social Security number (SSN)

Your document must include:

- Your first and last name:  
**Test John**
- The last four digits of your Social Security number:  
**xxx-xx-3333**

Here are common examples:

- A Social Security Card
- A Social Security Benefit Statement (SSA-1099)
- A W-2 from the last 2 years
- A prior year's state, federal, or Tribal tax return

#### How to add your photo or scanned copy

Please attach a picture or scanned copy of your document. Files must be less than 10 MB and one of the following file types: jpg, jpeg, png, pdf, or gif.

- Make sure your image is not blurry
- Make sure your document is not cut off and we can see all four sides
- Make sure you have good lighting

[Choose a file](#)

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### Proof of your Tribal ID Number

You may be asked to share a document to confirm your Tribal ID number.

- Share a document that includes:
  1. Your first and last name,
  2. Your Tribal ID number.
- Tap or click **Take a photo** or **Choose a file** to attach a photo or copy of the document.
- Tap or click **Next**.

### Share proof of your Tribal ID Number

Your document must include:

- Your first and last name:  
**Test John**
- Your Tribal ID Number:  
**333333**

Here are common examples:

- A Tribal ID card
- An official certificate or letter from your tribe's enrollment office
- A Certificate of Degree of Indian Blood (CDIB)

**Common mistakes:**

- Some CDIB cards do not include the required information. If yours does not, then it will not be accepted.

#### How to add your photo or scanned copy

Please attach a picture or scanned copy of your document. Files must be less than 10 MB and one of the following file types: jpg, jpeg, png, pdf, or gif.

- Make sure your image is not blurry
- Make sure your document is not cut off and we can see all four sides
- Make sure you have good lighting

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### Proof of your date of birth

You may be asked to share a document to confirm your date of birth.

- Share a document that includes:
  1. Your first and last name,
  2. Your date of birth.
- Tap or click **Take a photo** or **Choose a file** to attach a photo or copy of the document.
- Tap or click **Next**.

### Share proof of your date of birth

Your document must include:

- Your first and last name:  
**Test John**
- Your date of birth:  
**1/01/1980**

Here are common examples:

- A Driver's license that is not expired
- A Passport that is not expired
- A birth certificate
- A U.S. government, military, state or Tribal issued ID that includes your date of birth and is not expired
- A Certificate of Naturalization, Certificate of U.S. Citizenship, or Consular Matricular ID

#### How to add your photo or scanned copy

Please attach a picture or scanned copy of your document. Files must be less than 10 MB and one of the following file types: jpg, jpeg, png, pdf, or gif.

- Make sure your image is not blurry
- Make sure your document is not cut off and we can see all four sides
- Make sure you have good lighting

Choose a file

Back

Next

### Proof that you are alive

You may be asked to share a document to confirm you are alive.

- Share a document that includes:
  1. Your first and last name,
  2. An issue date within the last three months.
- Tap or click **Take a photo** or **Choose a file** to attach a photo or copy of the document.
- Tap or click **Next**.

### Share proof of life

Your document must include:

- Your first and last name:  
**Test John**
- An issue date within the last three months

Here are common examples:

- A current utility bill
- A paystub
- A mortgage or lease statement
- A retirement or pension statement of benefits
- A notarized letter that confirms your identity and that you are alive

#### How to add your photo or scanned copy

Please attach a picture or scanned copy of your document. Files must be less than 10 MB and one of the following file types: jpg, jpeg, png, pdf, or gif.

- Make sure your image is not blurry
- Make sure your document is not cut off and we can see all four sides
- Make sure you have good lighting

Choose file

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Next

<p><b>Proof of your eligibility</b></p> <p>You may be asked to share documents that confirm your eligibility (such as your income or participation in a government program).</p> <ul style="list-style-type: none"> <li>Choose how you qualify.</li> <li>Tap or click <b>Next</b>.</li> </ul>	<p><b>Share more information to see if you qualify</b></p> <p>With your help, we can confirm you qualify in a few more steps.</p> <hr/> <p><b>Do you have a document that shows your income?</b></p> <p><input checked="" type="radio"/> Yes. I have a document such as pay stubs, last year's tax return, or a social security statement.</p> <p><input type="radio"/> No. But I have a document that shows I (or my child or dependent) participate in a program such as SNAP or Medicaid.</p> <p><a href="#">Back</a> <a href="#">Next</a></p>
<p><b>Proof of your income</b></p> <p>To show <b>proof of your income</b>, you'll:</p> <ul style="list-style-type: none"> <li>Tell us how many people live in your household.</li> <li>Confirm if your annual income is at or below the amount shown.</li> <li>Share a document that includes:             <ol style="list-style-type: none"> <li>Your name or your dependent's name,</li> <li>Your annual income,</li> <li>An issue date within the last 12 months.</li> </ol> </li> </ul>	<p><b>Share more information to see if you qualify based on income</b></p> <p>You may qualify if your annual income meets certain requirements.</p> <hr/> <p><b>How many people live in your household?</b> ⓘ</p> <p>Number of people in my household:</p> <p><input type="text" value="1"/></p> <p><b>Is your annual income at or below \$20,331?</b> ⓘ</p> <p><input type="radio"/> Yes</p> <p><input type="radio"/> No. But I have a document that shows I (or my child or dependent) participate in a program such as SNAP or Medicaid.</p> <p><a href="#">Back</a> <a href="#">Next</a></p>
<p><b>Proof of your program participation</b></p> <p>To show <b>proof of your program participation</b>, you'll:</p> <ul style="list-style-type: none"> <li>Tell us which program you participate in.</li> <li>Share a document that includes:             <ol style="list-style-type: none"> <li>Your name or your dependent's name,</li> <li>The name of the program,</li> <li>The name of the government, Tribal entity, or program administrator that issued the document,</li> <li>An issue date within the last 12 months or expiration date in the future.</li> </ol> </li> </ul>	<p><b>Share proof of your program participation</b></p> <hr/> <p><b>Which program do you, your child or dependent take part in?</b></p> <p>You must provide proof of participation for the program you choose.</p> <p><input type="radio"/> SNAP (Supplemental Nutrition Assistance Program) or Food Stamps ⓘ</p> <p><input type="radio"/> Medicaid</p> <p><input type="radio"/> Supplemental Security Income (SSI)</p> <p><input type="radio"/> Federal Housing Assistance ⓘ</p> <p><input type="radio"/> Veterans Pension and Survivors Benefit Programs</p> <p><input type="radio"/> Tribal Specific Program (only choose if you live on Tribal lands)</p> <p><input type="radio"/> I don't think I (or my child or dependent) participate in any of these programs, but I may qualify through my <b>income</b>.</p> <hr/> <p><small>You will have until 9/22/2024 to provide more documents so we can determine whether you qualify for Lifeline. If we don't receive this information by then, you will need to come back to this site and fill this form out again.</small></p> <p><a href="#">Back</a> <a href="#">Next</a></p>

The final step is to certify and sign the application form.

- Read each statement and enter your initials.
- Enter your first and last name.
- Tap or click the checkbox to confirm you understand this is a digital signature.
- Tap or click **Submit**.

I agree, under penalty of perjury, to the following statements:

**Initial**  I (or my dependent or other person in my household) currently get benefits from the government program(s) listed on this form or my annual household income is 135% or less than the Federal Poverty Guidelines (the amount listed in the Federal Poverty Guidelines table on this form).

**Initial**  I agree that **if I move I will give my service provider my new address** within 30 days.

**Initial**  I understand that I have to tell my service provider within 30 days if I do not qualify for Lifeline anymore, including:

1. I, or the person in my household that qualifies, do not qualify through a government program or income anymore.
2. Either I or someone in my household gets more than one Lifeline broadband internet benefit (including, more than one Lifeline broadband internet service, more than one Lifeline telephone service, or both Lifeline telephone and Lifeline broadband internet services).

**Initial**  I know that **my household can only get one Lifeline benefit** and, to the best of my knowledge, my household is not getting more than one Lifeline benefit. [?](#)

**Initial**  I agree that all of the information I provide on this form may be collected, used, shared, and retained for the purposes of applying for and/or receiving the Lifeline Program benefit. I understand that if this information is not provided to the Lifeline Program Administrator, I will not be able to get Lifeline benefits. If the laws of my state or Tribal government require it, I agree that the state or Tribal government may share information about my benefits for a qualifying program with the Lifeline Program Administrator. The information shared by the state or Tribal government will be used only to help find out if I can get a Lifeline Program benefit.

**Initial**  All the answers and agreements that I provided on this form are true and correct to the best of my knowledge.

**Initial**  I know that **willingly giving false or fraudulent information to get Lifeline Program benefits is punishable by law** and can result in fines, jail time, de-enrollment, or being barred from the program.

**Initial**  My service provider may have to check whether I still qualify at any time. **If I need to recertify my Lifeline benefit, I understand that I have to respond by the deadline** or I will be removed from the Lifeline Program and my Lifeline benefit will stop.

**Initial**  If I am seeking to qualify for Lifeline as an eligible resident of Tribal lands, I live on Tribal lands, as defined in 54.400(e) of the Lifeline rules. [?](#)

### Your Signature

Type your full legal name below

Test: John

I understand this is a digital signature, and is the same as if I signed my name with a pen.

[Back](#)

[Submit](#)

You have submitted your application!  
We'll email you when our review is complete with instructions on what to do next.

We are reviewing your documents

It generally takes about 15 minutes, but could be up to 2 days.

We'll email you when our review is complete. You can check the status of your application at any time on your [account homepage](#).