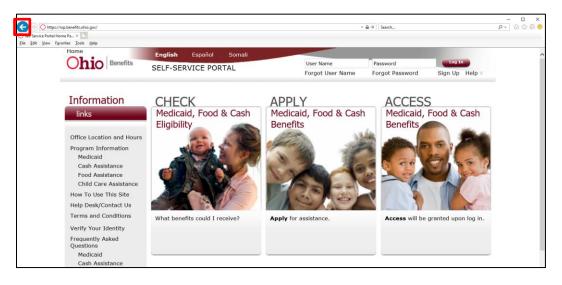


Important information to keep in mind when using the Early Childhood Services Eligibility Self-Assessment Tool

- 1. When using laptops and computers, the following browsers should be used:
 - Internet Explorer
 - Edge
 - Firefox
 - Chrome
- 2. If you are using a mobile device or a tablet, the following browsers should be used:
 - Safari
 - Chrome
 - Samsung Internet
- 3. To access the Early Childhood Services Eligibility Self-Assessment Tool, please open your browser to "**ssp.benefits.ohio.gov**".

New Tab	×	+		-	7	٥	×
\leftrightarrow > C C	https://ssp.ber	nefits.ohio.gov/	\heartsuit		a		:

4. Do not use the **Back** arrow on the browser to go back to a previous page. If you do, you will lose all the answers you have entered on the page.





5. Only use the buttons on the tool page to move from one page to another.

Example:

- a. Use the tool **Back** button on the tool page to go back to a previous page.
- b. Use the tool **Continue** button on the tool page to move to the next page.

Information	CHECK
links	eligibility
Office Location and Hours Program Information Medicaid Cash Assistance Food Assistance Child Care Assistance How To Use This Site Help Desk/Contact Us Terms and Conditions	Welcome! Welcome to the Early Childhood Services Eligibility Self-Assessment. This tool can help your family select an early childhood service: • Early Childhood Education Grant • Early Head Start • Help Me Grow Farly Intervention • Help Me Grow Home Visiting • Preschool Special Education • Publicly Funded Child Care
Verify Your Identity Frequently Asked Questions Medicaid Cash Assistance Food Assistance Child Care Assistance Forms	For help with answering the questions in this tool, please use the Early Childhood Services Eligibility Self-Assessment User Guide or Frequently Asked Questions Once you have answered the questions, your results will be shown. This tool is not an application. Please contact or apply for every service you are interested in, even if listed as not eligible. Click on each service for more information. If you leave this tool, you must answer all questions again. To return to a previous screen, use the 'Back' button at the bottom of the screen. The answers you provide on this tool are confidential. To get started, click the 'Continue' button.
What's New?	Back Continue



Step by Step Instructions for Using the Early Childhood Services Eligibility Self-Assessment Tool:

Early Ch	ildhood Service	es Eligibility Se	lf-Assessment
Using the E	Early Childhood Ser	vices Eligibility Sel	f-Assessment Too
•	enefits.ohio.gov. o the Ohio Benefits Self S er CHECK, APPLY and ACC		ge where you will see s
Home Benefits	English Español Somali SELF-SERVICE PORTAL	User Name Forgot User Name	Password Cog In Forgot Password Sign Up Help I
Information links Office Location and Hours Program Information Medicaid Cash Assistance Food Assistance Child Care Assistant How To Use This Site Help Desk/Contact Us Terms and Conditions Verify Your Identity Frequently Asked Questions Medicaid Cash Assistance Food Assistance Child Care Assistant Forms What's New?	What benefits could 1 receive?	APPLY Medicaid, Food & Cash Benefits	ACCESS Medicaid, Food & Cash Benefits Control of the second secon



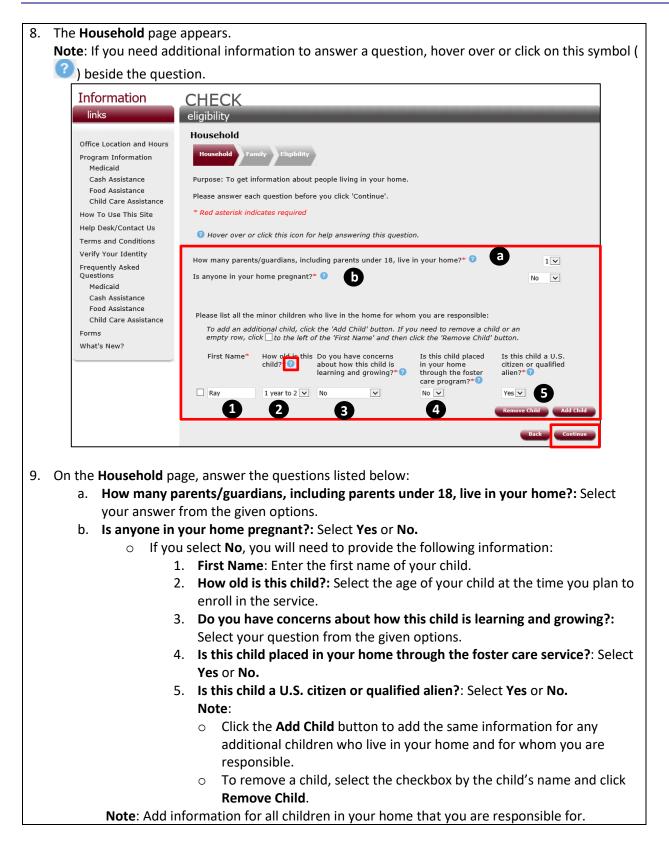
- 3. In the second row of the Home page, find the picture box with the title 'CHECK Early Childhood Services Eligibility.'
- Under this picture box, click the question What services could my family receive?
 Note: This question is a link to the Early Childhood Service Eligibility Self-Assessment Tool.





The available services are: a. Early Childhood Education G b. Early Head Start c. Head Start d. Help Me Grow Early Interver e. Help Me Grow Home Visiting	
 a. Early Childhood Education G b. Early Head Start c. Head Start d. Help Me Grow Early Interver e. Help Me Grow Home Visiting 	
 a. Early Childhood Education G b. Early Head Start c. Head Start d. Help Me Grow Early Interver e. Help Me Grow Home Visiting 	
 b. Early Head Start c. Head Start d. Help Me Grow Early Interver e. Help Me Grow Home Visiting 	
d. Help Me Grow Early Interver e. Help Me Grow Home Visiting	
e. Help Me Grow Home Visiting	
f. Preschool Special Education	-
g. Publicly Funded Child Care	
Home English Español Benefits SELE SERVICE PORT	Somali User Name Password Log In
SELF-SERVICE PORT	AL Forgot User Name Forgot Password Sign Up Help
Information CHECK links eligibility	
Office Location and Welcome!	
Program Information select an early childho	Childhood Services Eligibility Self-Assessment. This tool can help your family ood service:
Medicaid Cash Assistance <u>Early Childhood Edi</u> Food Assistance <u>Early Head Start</u>	ucation Grant
Child Care Assistance - Helo Me Grow Early	
Help Desk/Contact Us Preschool Special E Publicly Funded Chi	ducation
Early Childhood Servi	ring the questions in this tool, please use the ices Eligibility Self-Assessment User Guide or Frequently Asked Questions
Questions Once you have answe	ered the questions, your results will be shown. This tool is not an application. ply for every service you are interested in, even if listed as not eligible. Click on
Food Assistance If you leave this tool, Child Care Assistance 'Back' button at the b Forms get started, click the ' What's New?	, you must answer all questions again. To return to a previous screen, use the bottom of the screen. The answers you provide on this tool are confidential. To 'Continue' button.
This is the first	Sect







- If you select **Yes**, you will be required to answer the additional questions listed below.
- c. Are there any children living in the home for whom you are responsible?: Select Yes or No
 - o Select No and click Continue; or
 - Select **Yes** and complete the following information:
 - 1. First Name: Enter the first name of your child.
 - 2. How old is this child?: Select the age of your child at the time you plan to enroll in the service.
 - 3. Do you have concerns about how this child is learning and growing?: Select your answer from the given options.
 - 4. Is this child placed in your home through the foster care service?: Select Yes or No.
 - 5. Is this child a U.S. citizen or qualified alien?: Select Yes or No. Note:
 - Click the Add Child button to add the same information for any additional children who live in your home and for whom you are responsible; or
 - To remove a child, select the checkbox by the child's name and click **Remove Child**.

Note: Add information for all children in your home that you are responsible for.

H	ousehold								
1	Household Fa	mily Eligibility							
PL	urpose: To get in	nformation about people li	iving in	n your home.					
		ch question before you cli	ck 'Co	ntinue'.					
	Red asterisk ind								
	Hover over or	r click this icon for help ar	nswerin	ng this questi	on.				
H	ow many parent	s/guardians, including pa	rents (under 18, live	in your home	?* 🕜			2 🔻
Is	anyone in your	home pregnant?" 📀						Yes	
A	re there any chil	dren living in the home for	or who	m you are re	sponsible?"			Yes	
P	lease list all the	minor children who live i	n the l	nome for who	m vou are res	ponsil	ole:		
Γ		ditional child, click the 'Ad lick 🗆 to the left of the 'Fir							
	First Name*	How old is this child?*			concerns his child is growing?" (2)	in y	our home	oster alien	en or qualit
	Ray	1 year to 2	٠	No	۲	No	•	Yes	•
0	Rumi	2 years up to 3 years	٠	No	۲	No	•	Yes	•
0							Re		Add Chi



Purpo	sehold Family Eligibility	
	ose: To get information about the family in the home.	
-	e answer each question before you click 'Continue'.	
* Red	asterisk indicates required	
0 F	lover over or click this icon for help answering this question.	
What	county do you live in?* 🕐 a	Franklin 🗸
Is yo	ur family experiencing homelessness?* 🧿 🕩	No 🗸
Is at curre	least one parent/guardian, including parents under 18, ntly working, in school, or in a training program?* 7	Yes
Secu	least one parent/guardian or child in your home receiving Supplemental dirity Income (SSI) or Temporary Assistance for Needy Families F) cash assistance?* ?	No
` Woul	d you prefer to give your income monthly or annually? * 7	Monthly V
What	is the total gross income of all parents/guardians of the children who live in the ome?* (?)	
		Back Continue
с.	Is at least one parent/guardian, including parents under 18, o	currently working, in
	school, or in a training service?: Select Yes or No. Is at least one parent/guardian or child in your home receivin Income (SSI) or Temporary Assistance for Needy Families (TA Yes or No. Would you prefer to give your income monthly or annually?: Annually. What is the total gross income of all parents/guardians of the home?: Select your answer from the options given.	NF) cash assistance? Select Monthly or



Eligibility If you want to change an answer, please select the 'Back' button at the bottom of your screen. If you leave this tool, you must answer all questions again. You can print or save your results. Below are your results. Services are shown in alphabetical order. You should contact or apply for every service you are interested in, even those listed as not eligible. If vou want to change an answer, please select the 'Back' button at the bottom of your screen. If you leave this tool, you must answer all questions again. You can print or save your results. Below are your results. Services are shown in alphabetical order. You should contact or apply for every service you are interested in, even those listed as not eligible. If vot want to change and answer. Below are your results. Services are shown in alphabetical order. You should contact or apply for every service you are interested in, even those listed as not eligible. If vot would ble of the information for each service. Services you may not be eligible for: Early Childhood Education Grant Help Me Grow Early Intervention Preschool Special Education If you would like to print or save your results, click the Print/Save Results button. Note: When you click the Print/Save Results button, your completed assessment is downloa as a PDF. On the downloaded PDF, when you hover over the document, a menu bar is displayed. If you would like to print or save your results click the Save icon in the menu bar at the bottom of your PDF. <th>. The</th> <th>Eligibility page appears.</th>	. The	Eligibility page appears.
leave this tool, you must answer all questions again. You can print or save your results. Below are your results. Services are shown in alphabetical order. You should contact or apply for every service you are interested in, even those listed as not eligible. I click to open or close the information for each service. Services you may be eligible for: Early Head Start Help Me Grow Home Visiting Publidy Funded Child Care Services you may not be eligible for: Early Childhood Education Grant Head Start Help Me Grow Early Intervention Preschool Special Education I there set e event is displayed. If you would like to print or save your results, click the Print/Save Results button. Note: When you click the Print/Save Results button, your completed assessment is downlot as a PDF. On the downloaded PDF, when you hover over the document, a menu bar is displayed. To save the downloaded PDF, click the Save icon in the menu bar at the bottom of your PDF. To print the PDF, click Print icon in the menu bar.	I	
Below are your results. Services are shown in alphabetical order. You should contact or apply for every service you are interested in, even those listed as not eligible. Pint/Second Pint Pint/Second Pint/Second Pint/Second Pint/Second Pint/Second Pint/Second Pint/Second Pint/Second Pint/Second Pint/Second Pint Pint/Second Pint Pint Pint Pint/Second Pint Pint Pint/Second Pint Pint Pint Pint Pint Pint Pint Pint		If you want to change an answer, please select the 'Back' button at the bottom of your screen. If you leave this tool, you must answer all questions again. You can print or save your results.
 Click to open or close the information for each service. Services you may be eligible for: Early Head Start Help Me Grow Home Visiting Publidy Funded Child Care Services you may not be eligible for: Early Childhood Education Grant Help Me Grow Early Intervention Preschool Special Education If you would like to print or save your results, click the Print/Save Results button. Note: When you click the Print/Save Results button, your completed assessment is downloa as a PDF. On the downloaded PDF, when you hover over the document, a menu bar is displayed. Image: Click the Save icon in the menu bar at the bottom of your PDF to print the PDF, click Print icon in the menu bar.		Below are your results. Services are shown in alphabetical order. You should contact or apply for every
 Early Head Start Help Me Grow Home Visiting Publidy Funded Child Care Services you may not be eligible for: Early Childhood Education Grant Head Start Help Me Grow Early Intervention Preschool Special Education If you would like to print or save your results, click the Print/Save Results button. Note: When you click the Print/Save Results button, your completed assessment is downloa as a PDF. On the downloaded PDF, when you hover over the document, a menu bar is displayed. To save the downloaded PDF, click the Save icon in the menu bar at the bottom of your PDF To print the PDF, click Print icon in the menu bar.		
 Help Me Grow Home Visiting Publicly Funded Child Care Services you may not be eligible for: Early Childhood Education Grant Head Start Help Me Grow Early Intervention Preschool Special Education If you would like to print or save your results, click the Print/Save Results button. Note: When you click the Print/Save Results button, your completed assessment is downloa as a PDF. On the downloaded PDF, when you hover over the document, a menu bar is displayed. If or a 1 / 3 Or or or save your PDF. To save the downloaded PDF, click the Save icon in the menu bar at the bottom of your PDF. To print the PDF, click Print icon in the menu bar.		Services you may be eligible for:
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Early Childhood Services Eligibility Self-Assessment	**
Date Printed:07/26/2019	1
To access the Self-Assessment tool, please visit: https://ssp.benefits.ohio.gov	BOLD
Self-Assessment Details:	ginning!
Household:	
How many parents/guardians, including parents under 18, live in your home?	1
Is anyone in your home pregnant?	Yes
Are there any children living in the home for whom you are responsible?	No
Family:	
What county do you live in?	Brown
Is your family experiencing homelessness?	N
Is at least one parent/guardian, including parents under 18, currently working, in school, or in a training program?	Ye
Is at least one parent/guardian or child in your home receiving Supplemental Security Income (SSI) or Temporary Assistance for Needy Families (TANF) cash assistance?	N
Would you prefer to give your income monthly or annually?	Monthl
What is the total gross income of all parents/guardians of the children who live in the home? Eligibility Results: Below are your results. Services are shown in alphabetical order. You should contact or apply for evolution of the evolution of the services are shown in alphabetical order. You should contact or apply for evolution of the evolution of the services are shown in alphabetical order.	\$0-\$1,372
Services you may be eligible for:	
 Early Head Start: Early Head Start serves infants, toddlers (up to age three), and pregnant women. Programs services that support early learning, health, and family well-being, while engaging parents a as partners every step of the way. Early Head Start programs vary by community but may incenter-based, home-based, and/or family child care options. To find a program, apply, or for more information: https://eclkc.ohs.acf.hhs.gov/ 	and guardians



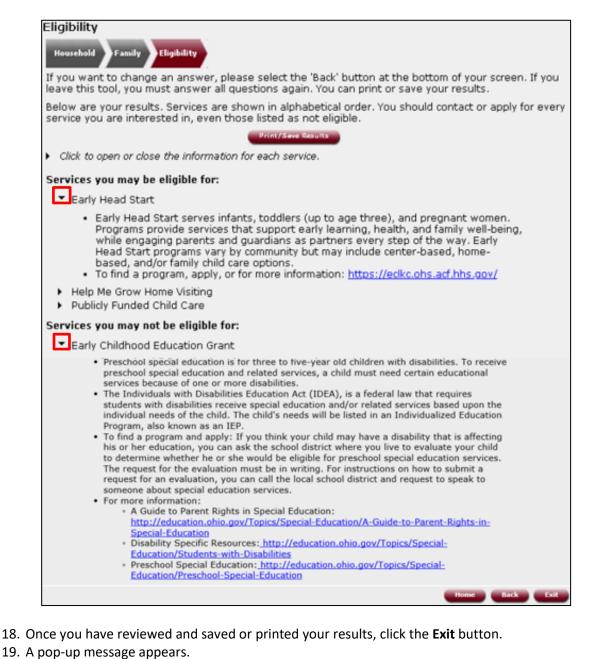
Additional Information on the Eligibility page

In addition to saving and printing a completed assessment, the **Eligibility page** contains information about additional services that you might be eligible for.

These services are listed out on the page. Each of the listed services has a black symbol (🏲) called a caret that you can expand to get the additional information.

When you expand a service caret, you will see a link to the service page where you can find information to apply for the service you want.

See screenshot below.





Eligibility			
Household Family	Eligibility		
	ge an answer, please select t nust answer all questions ag		
	lts. Services are shown in alp rested in, even those listed a		d contact or apply for every
	Print/Sa	ve Results	
 Click to open or clo 	se the information for each se	ervice.	
Services you may b	e eligible for:		
Early Head Sta			
 Help Me Grow Publicly Funde 	WARNING!		
	If you leave this tool, you m all questions again. Are you	ust answer sure vou	
Services you may	want to leave this page?	Sure you	
 Early Childhoc Head Start 			
	Ret	Exit	
 Help Me Grow Preschool Spec 		Exit	
Help Me Grow		Ekit	
 Help Me Grow Preschool Spec 			
 Help Me Grow Preschool Spec 	cial Education		
 Help Me Grow Preschool Spectrum a will be navigated 	a back to the Ohio Bene English Español Somall SELF-SERVICE PORTAL	efits Self Service Porta	Password tog In Forgot Password Sign Up Help
Help Me Grow Preschool Spec will be navigated	a back to the Ohio Bene English Español Somall SELF-SERVICE PORTAL CHECK Medicaid, Food & Cash	efits Self Service Portal	Home page. Password Forgot Password Sign Up Help ACCESS Medicaid, Food & Cash
 Help Me Grow Preschool Spec a will be navigated Home Ohio Benefits Information links 	a back to the Ohio Bene English Español Somall SELF-SERVICE PORTAL CHECK	efits Self Service Porta	Password Log In Forgot Password Sign Up Help
 Help Me Grow Preschool Spec a will be navigated Home Chico Benefits Information links Office Location and Hours 	a back to the Ohio Bene English Español Somall SELF-SERVICE PORTAL CHECK Medicaid, Food & Cash	efits Self Service Portal	Home page. Password Forgot Password Sign Up Help ACCESS Medicaid, Food & Cash
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 Help Me Grow Preschool Spect a will be navigated Home Denois Benefits Information links Office Location and Hours Program Information Medicaid Cash Assistance Food Assistance Child Care Assistance Child Care Assistance How To Use This Site Help Desk/Contact Us Terms and Conditions Verify Your Identity	d back to the Ohio Bene English Español Somal SELF-SERVICE PORTAL CHECK Medicaid, Food & Cash Eligibility	efits Self Service Portal User Name Forgot User Name APPLY Medicaid, Food & Cash Benefits	Home page.



2 Early Childhood Services Eligibility Self-Assessment Tool Timeout

- 1. If you are inactive while using the Early Childhood Services Eligibility Self-Assessment Tool, you will be timed out.
- 2. Once you are timed out, you will lose all the information you entered into the tool and will need to complete the tool again.

Note: You can be timed out on any page of the tool.

hio Benefits	SELF-SERVICE PORTAL	User Name	Password	Log In
	SELF-SERVICE PORTAL	Forgot User Name	Forgot Password	Sign Up Help 👔
Information	ACCOUNT			
links		_	_	_
Office Location and Hours	Your session has expired.			
Program Information Medicaid	Click here to sign in again.			

3. If you are timed out of the tool, click the Ohio Benefits logo on the Time out page to return to the Home page (Ohio Benefits)

Information links	ACCOUNT	_	_	_
Office Location and Hours	Your session has expired.			
Program Information Medicaid	Click here to sign in again.			
Cash Assistance Food Assistance Child Care Assistance				





Appendix A: Version History

Version	Details	Date
V2	Minor Update	09/10/2019