

**FREE & LOCAL** HUNGER FASK FORCE

## FoodShare Application Walkthrough

- A step-by-step guide through Wisconsin's FoodShare application process.



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## What's in this walkthrough?

Our FoodShare experts dissected the entire application, took screenshots of the parts that are either most important or most confusing, and provided context, notes, and tips so you have all the information you need to successfully complete the application.

Your application may look slightly different depending on how you answer the questions.

If you have additional questions, our contact information is at the end of the guide. Give us a call at 414-897-0460 and we'll help you out!

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## Before you start

- Have some documents on hand
  - Social Security numbers for all members in family (if possible)
  - Housing/utility information
  - Job information
  - Income information
  - Any other type of income (ex: child support, unemployment, social security)
  - Childs school information (ex: report card, statement from school)

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## ACCESS connects you with the help you need when you need it.

Need help getting health care coverage, paying for groceries or child care costs, finding a job, or building your career skills?

With ACCESS, you can apply for and manage your state of Wisconsin's public benefit programs in one place, at any time.

**When First starting an application, click on the apply now button.**

Apply now | Login

Forgot an application | Create an account

**See if you qualify >**

Before applying, answer a few optional questions to find out which programs may be right for you.

**Apply for benefits >**

Apply for just one program or multiple programs at the same time. To get started, you'll need to create an ACCESS account.

**Manage your benefits >**

Log into your ACCESS account to view letters, get reminders, report changes, submit documents, and more.

**Renew or apply for more >**

Submit reminders or apply for other programs right from your ACCESS account.

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## Setting Up An Account

To sign online, you will need to create a Username (User ID) and password. If you already have an account, click here to log in.

This account will help to help you manage your information online and access it. It also lets you save your applications and come back to work on them. This can help you track the status of your applications after you submit it. Make sure that you can use the account information (User ID and password) at all times.

If you have trouble setting up your account, click here. If you still need help, call Member Services at 1-800-422-2020.

**Step 1: Your Name and Email Address**

Please fill in your name below:

First Name:

Last Name:

Email Address:

**Step 2: Your ID and Password**

To log in to your account, you will need to create a User ID and password. For rules on creating your password and User ID, click here.

You will need these to log in on the next page. It's a good idea to write these down and keep them in a safe place.

User ID:  **Must be 8-20 letters and/or numbers**

Password:  **Contains the user name**

Repeat Password:  **Contains the User name and your User ID**

Repeat Password:  **Must use letters and at least one number**

**Step 3: Review Questions**

Here you will answer the "review questions" that you can use if you ever need to recover your password. Click on each box to check a question that you wish to answer. Then click on the "Next" button. It's a good idea to write down the answer you give since you will need to type it in exactly the same way if you lose your password.

Review Questions:  Click here to choose

Answer:

**Step 2:** Create a username and password. Make sure to write it down as you will need it when your case is opened.

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## ACCESS

Your tracking number: 0900389508

**Start**

Thinking ACCESS

Before you get started, tell us if you are applying:

- For yourself
- For another person
- As a community agency set up to help people use ACCESS

Link your Express Enrollment Information

Has an Express Enrollment (EE) application been submitted for you or your household in the last 90 days?  Yes  No

The first screen you come to will ask who is applying. Click on the "For Yourself" button.

The next question asks about Express Enrollment, if you are unsure what this means, click 'No' and click the Next button.

**Which Benefits Would You Like to Apply For?**

The first step is to tell us which benefits you would like to get. Please check the box for each benefit you would like to apply for. Then click the "Next" button at the bottom of the page.

- FoodShare.** This is Wisconsin's version of the federal Supplemental Nutrition Assistance Program (SNAP). Foodshare benefits come on a plastic card, called the Wisconsin QUEST Card, which you can use to buy food at most food stores.
- Health Care benefits through BadgerCare Plus and/or Medicaid.** This program provides health insurance benefits.
- Family Planning Only Services.** This program provides confidential, no-cost family planning services and supplies.
- Child Care.** This program provides help with paying for child care for children under 13 years old (up to 10 special needs).

Buttons: Back, Save & Exit, Next

- This guide is specific to Foodshare, but you are also able to apply for BadgerCare, Child Care or Family Planning Only services as well.  
 - Click on these additional options if these apply to you.

**Where You Live**

If you are staying in a shelter or living with a friend or family member, you can give us that agency or person's address. We want to get the name of the person or agency on the second line, and write us in front of the name.

If you have an apartment number, you should put it in Address Line 2.

Address Line 1: [Field]  
 Address Line 2: [Field]  
 City: [Field]  
 State: [Field]  
 Zip Code: [Field]

**Your Mailing Address**

If your mailing address is the same as the address above, you can leave this section blank. If you are homeless, you can leave this section blank. If you want to use the address of a friend, family member or shelter, put it in and then the name of the friend, family member or shelter in Address Line 2. If you don't want us to send any mail about your benefits to the address you gave above, please give us a mailing address.

If you have an apartment number, you should put it in Address Line 2.

Address Line 1: [Field]  
 Address Line 2: [Field]  
 City: [Field]  
 State: [Field]  
 Zip Code: [Field]

**Homeless Information**

Are you homeless right now?  Yes  No

If you are homeless, we mean you are staying at a shelter or don't have a place to sleep at night. To find out more about what we mean by homeless, click the help button.

After entering demographics, you'll reach the 'Where You Live' section.

'Homeless' is defined by our state Department of Health Services as anyone who does not have a permanent nighttime residence. (more information about homeless situations on the next slide)

If you are homeless, you are only required to fill in a mailing address.

### Details about Homelessness:

A homeless individual is one who lacks a fixed, regular nighttime residence OR whose primary residence is:

- A **supervised shelter** designed to provide temporary accommodations,
- An institution that provides **temporary residence** for individuals intended to be institutionalized,
- A **temporary accommodation** for not more than 90 days in the residence of another individual,
- A place **not designed for** or ordinarily used as a regular sleeping accommodation.

**Review Your Answers: Help From Others**

Representative	Type	Complete?	Change or Erase

**Add a Representative**

If you have an authorized representative, legal guardian, or power of attorney, select that option from the menu below and click Add.

< click here to choose >

Each time you complete a section, you'll reach a 'Summary' this is where you can go back and edit the information that you entered.

As you continue to work through the application, if you make a mistake keep going and then make edits when you reach the 'summary' page.

If you are unable to manage your benefits yourself, you can add a trusted friend or family member as a Representative so they can assist in managing your benefits.

**Ethnicity and Race**

Please check the box or boxes that best describe this person's ethnicity and race. You don't have to answer these questions if you don't want to. We're using these questions to help improve our programs and make sure they do not discriminate based on ethnicity or race. Your answers will not be used to make a decision about your programs and benefits.

What is the person's ethnicity?  
 Hispanic or Latino  Not Hispanic or Latino

What is the person's race?  
 American Indian or Alaska Native  Asian  Black or African American  Other Pacific Islander

How many people live in your household?  
 [Field]

Are you the head of household?  
 Yes  No

- For the number of people in the household, only mark down the people you want on your Foodshare case and make sure to include yourself in the total number.  
 - If they aren't family, only include people who you share meals or food with.  
 - Note: If a child that is 22 or younger is living with you, they must be on the family's case and cannot have a separate case.

-if there are multiple people on your case, the next page will look the same as this and you will enter in the information for each of the members in your family.

-You will now provide some more information about yourself including how many people are in the household.

**People in Your Home**

You have already told us about the following people:

Name	Relationship	Age	Sex	Race	Ethnicity
[Name]	[Relationship]	[Age]	[Sex]	[Race]	[Ethnicity]

**Personal Information**

If this person has the same first name as someone else in your home, click here.

First Name: [Field] Middle Name: [Field] Last Name: [Field]  
 Gender:  Male  Female  Not Specified  
 Date of Birth: [Field]  
 What language does this person speak at home? [Field]  
 How long does this person live in your home? [Field]  
 How many people live in your home in the last 12 months? [Field]  
 How many people live in your home in the last 12 months? [Field]

- Here is an example of what the additional household members information would look like.

**How You Are Related**  
Please tell us how the people in your home are related to each other.  
Marital relationships include marriages between spouses of the same gender.  
NOTE: You should only select "to the father of" or "to the mother of" if the person is the child's legal parent or legal stepparent. A legal parent is a person who is listed as a parent on a child's birth certificate and who has been determined to be a child's legal parent through a court order such as an adoption order. Click here for more information.

**John's Relationship to Jane**  
Jane is the  of John.  
Does Jane live here and eat meals with John?  
 Yes  No  Don't Know

**John's Relationship to Jimmy**  
Jimmy is the  of John.  
Does Jimmy live here and eat meals with John?  
 Yes  No  Don't Know

**Other**  
Please tell us how the people in your home are related to each other.  
Marital relationships include marriages between spouses of the same gender.  
NOTE: You should only select "to the father of" or "to the mother of" if the person is the child's legal parent or legal stepparent. A legal parent is a person who is listed as a parent on a child's birth certificate and who has been determined to be a child's legal parent through a court order such as an adoption order. Click here for more information.

After entering information for the members of your household, it will ask how everyone is related. If your relationship is not listed select 'other' to move on with the application.

-Note: if you select yes for the sharing food question, they will be included in your Foodshare case, if you select no, they will not be included on your Foodshare case.

**More About Children**  
Please click the button to tell us who is Jimmy's primary caretaker. By primary caretaker, we mean the person who has the most responsibility for Jimmy's care.

**Your FoodShare Request**  
You're not on that you would like to apply for FoodShare benefits. The people listed below will be part of your FoodShare request.

**Caretaker**  
Please click the button to tell us who is Jimmy's primary caretaker. By primary caretaker, we mean the person who has the most responsibility for Jimmy's care.

No one  
 Jane  
 Jimmy

- After completing the caretaker question, you will come to a screen that shows who is all included in your Foodshare case.

- If married: you can only pick one person as the primary caretaker of the child.
- If single parent: the parent who is with the child for more than 50% of the time will be able to add them to their case.

**More About the People on Your Application**  
Next, please tell us more about the people in your home.

**More about John**  
Make if this person is not applying for benefits, you do not have to provide a Social Security number for them.  
Social Security Number:   
If this person does not have a Social Security number but has applied for one, an actual date for when you will?  
  
Does this person live in Wisconsin?  Yes  No  
Is this person a U.S. citizen?  Yes  No

**More about Jane**  
Make if this person is not applying for benefits, you do not have to provide a Social Security number for them.  
Social Security Number:   
If this person does not have a Social Security number but has applied for one, an actual date for when you will?  
  
Does this person live in Wisconsin?  Yes  No  
Is this person a U.S. citizen?  Yes  No

-Note, if you have everyone's social security number with you put it in. But if you don't have that information on hand you may continue the application without that information as you can confirm it in the interview portion.

**ACCESS**  
Your tracking number: 000039500

**School Enrollment**  
Tell us more about Jane's school enrollment.  
Is Jane enrolled in school right now?  Yes  No

**School Enrollment**  
Tell us more about Jimmy's school enrollment.  
Is Jimmy enrolled in school right now?  Yes  No

Note: They will ask about schooling for every person on the case that is of school age or older.  
\*\*If you need help getting the needed documentation, please reach out to your school or school district.

**School Enrollment**  
Tell us more about John's school enrollment.  
Is John enrolled in school right now?  Yes  No

**School Enrollment Details**  
Choose John's school enrollment status:  
 Full time  Less than half time  
 More than half time  Half time  
Please choose what type of school John attends.  
 Elementary School  
 Middle School  
 High School  
 College, University or Vocational School  
 School for people with disabilities  
 Other  
 K through 12 (Parochial)

**College, University or Vocational School**  
If you choose College, University or Vocational School check the box below for anything that applies to John.  
 John is caring for a child under 6 years old.  
 John is caring for a child who is 6 to 12 years old and adequate daycare is not available for the child.  
 John is in a federal or state funded work-study program.  
 John is in school through a placement by Workforce Investment Act (WIA), Wisconsin Works (W-2), or FoodShare Employment and Training (FSET).

Fill in information about each person's school enrollment.

**ACCESS**  
Your tracking number: 000039500

**Job Information**  
Tell us more about Jane's job information.  
Is Jane currently working or has she recently ended a job?  
 Yes  No

**Job Information**  
Tell us more about Jimmy's job information.  
Is Jimmy currently working or has he recently ended a job?  
 Yes  No

The next page is about job information. Click the box next to the persons name for anyone who is currently working or who has had a job that has recently ended.

If you click yes to any of the questions, there will be a follow up page where you can provide specific job information.

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Your tracking number: 0900389508

**Weekly Pay**  
 "Does John get paid by the hour?"  Yes  No  
 "What is John's hourly pay?" (Please give us John's regular hourly rate of pay. NOT just about overtime and other kinds of pay bonus) \$12.00  
 "Has he ever been paid more than his regular hourly rate?"  Yes  No  
 "Has he ever been paid more than his regular hourly rate on a holiday, weekend, or other time?"  Yes  No

**Other Hourly Pay**  
 "Does John get any other hourly pay, such as overtime, holiday, and weekend pay?"  Yes  No

**Tips, Bonuses or Commission Pay**  
 "Does John get tips, bonus, commission or other pay?"  Yes  No

**Other Jobs**  
 "Does John have any other jobs?"  Yes  No

**Note:** Only info needed for place of employment is the name of employer. The more detail you give may make verification of your job easier, however.

**\*If hours worked is inconsistent, put down an average for one total week.**

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Your tracking number: 0900389508

**Other Types of Income**  
 "Have there been any other types of income that you received in the last 12 months?"  No  Yes

**Other Income**  
 - Supplemental Security Income (SSI)  
 - Social Security  
 - Child Support  
 - Other Income

**Note:** The page following 'Job Information' addresses money or income that is not from a job. If you receive money that is not from a job, Social Security, SSI or child support, click on 'Other Income' and indicate who is receiving this other income.

**Look below to see what screen appears if you select that you are receiving 'other income.'**

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Your tracking number: 0900389508

**Utilities**  
 "Do you pay for any of the following utilities?"  No  Yes

**Rent**  
 "Does John pay rent?"  No  Yes

**Note:** If you are homeless but you pay for shelter you can include that as a bill you pay.

- When you select a 'bill you pay' you will be asked to provide more information on the next page. Please see the next slide for an example of this.

- For a family, only mark down one person paying the bills if it is a shared cost.
- Additionally, if you live in senior housing and heat/water/etc is included do not mark down that you are paying utilities.

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Your tracking number: 0900389508

**Expenses**  
 "Do you pay for any of the following expenses?"  No  Yes

**Rent**  
 "Does John pay rent?"  No  Yes

**Examples of utilities that you can get credit for include:**  
 -Electric bill  
 -Water bill  
 -Phone bill  
 -A/C Surcharge

**In this example, John pays rent. If there is no other housing bill, click 'Next.' The other three images show additional questions about expenses.**

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Your tracking number: 0900389508

**Unpaid Medical Bills**  
 "Do you have any unpaid medical bills?"  No  Yes

**Note:** \*You can submit medical bills from anyone in your FoodShare household. Significant unpaid medical expenses may potentially increase the amount of Foodshare you receive each month.

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Your tracking number: 0900389508

**Health Insurance Coverage**  
 "Do you or anyone in your household have a health insurance policy that covers you or anyone else in your household?"  No  Yes

**Note:** -If you indicated that you do have an insurance policy, you will be directed to this page where you can input information regarding your Health insurance coverage.

**\*If you or your family currently has Health Insurance that is not BadgerCare Plus, Medicaid or Medicare indicate that you do have a health insurance policy.**

**Note:** This page may pop up indicating that something is missing from your application. In this example it is stating this due to only inputting the name of my employer for Job income.

Below is why it is stating that you are missing info. This does not have to be put in to submit the application. Click the next button to continue.

**When you see this page you are almost done with the application.** Many of the questions asked on this page you have already answered. Make sure to double check them, especially the income portion as the only income that should be there is income from the last 30 days.

This is the final page of the online application! Make sure to electronically sign at the bottom of the page and hit the submit button.

Once you have submitted the application it will take you to this screen. Make sure to take note of the tracking number as this is needed when you do the interview with your local agency.

To find out the contact info of your local agency to complete the interview, click on this button.

Once you have your local agencies contact info hit the next button as it will tell you the potential verification that will be needed.

**Note:** Not everything listed on needed documentation will be needed. It is a potential list of things that you should turn in. However if you have on hand any of the items listed you can turn them in just incase, they will be needed once the interview is complete.

**Next Steps:** Please choose one of the options below to send us your documents.

- ☑️ Scan in your documents
- ☑️ Mail in your documents
- ☑️ Drop your documents in person
- ☑️ Clear your documents using the ACCESS website
- ☑️ Upload your documents using the ACCESS website
- ☑️ Drop the day for right now. We'll bring you into the ACCESS website later and remind this step.

If you have electronic versions of these documents, click on the upload your documents using the Access website and you can upload electronic versions of documents right away.

## Next Steps

- Once you complete the online application you need to complete an interview with your local agency. Please look below to find your local agencies contact information.

<b>Red River Band of Lake Superior Tribe of Chippewa Indians</b> 715-482-7127	<b>WIS</b> 888-947-6883
• Brown	• Washburn
• Marmette	• Fond du Lac
• Shawano	• Waubesa
• Oconto	• Wisconsin
• Oneida	• Washburn
• Adams	• Dane
• Juneau	• Sauk
• Douglas	• Dodge
• Richland	• Sheboygan
• Grant	• Langlade
• Marathon	• Oneida
• Portage	• Pierce
• Crawford	• Green
• Jefferson	• Rock
• Grant	• Iowa
• Lafayette	• Stockbridge-Munsee Community
• Wisconsin	• Wisconsin
• Buffalo	• Jackson
• Monroe	• Trempealeau
• Clark	• La Crosse
• Health	• Vernon
• Wisconsin's Kenesho Roodie Partnership (WRXP)	• Kenesho
• Racine	
• Wisconsin Indian Tribe of Wisconsin	• Wisconsin

## What to Expect During the Interview

- The interview is an overview of the answers you just submitted, verifying the information on your application.
- The length of the interview can vary on a number of factors, but typically takes between 15 and 45 minutes.
- Be sure to listen carefully to what you are being asked. If you do not understand the question, please ask for clarification.

## What Else Should You Do?

- Download the MyAccess Mobile app to your phone to turn in needed verification. This app will help you easily manage your benefits!
- Below are links on how to work the app.
  - Video for creating an account: <https://youtu.be/eix54FvVXVw>
  - Video for checking your benefits: <https://youtu.be/4S0D0K2YMCQ>
  - Video for submitting documents: <https://youtu.be/wgY82KvnUac>



## Know Your Rights!

- If you think there has been a wrong decision about your Foodshare benefits, you can request a fair hearing.
- You can ask for a fair hearing up to 90 days after a specific decision is made, including if your benefits have ended or been reduced.
- You may bring a friend or family member with you to the hearing.
- You may also be able to get free legal help from legal action by calling 414-278-7722.

## Asking for Fair Hearing Requests

- In person or by telephone (Foodshare only) through Milwaukee Enrollment Services: 1-888-947-6583
- Through the Division of Hearings and Appeals by calling 608-264-9854
- Via written request:
  - [www.dhs.wisconsin.gov/forwardhealth/resources.htm](http://www.dhs.wisconsin.gov/forwardhealth/resources.htm)
  - Fax to: 608-264-9885
  - Mail to: Division of Hearings & Appeals
    - PO Box 7875
    - Madison, WI 53707

## Questions or Need Help?



Help with the application, call: **414-897-0460**  
Need Emergency Food?

- [Click Here to view our Emergency Food Resource Map](#)

