

Special Allowance Request Form

Print Name _____ Date _____

SPALS will be processed when: This Form is completed in its entirety, all necessary supporting documentation is attached and your weekly hourly requirements are in compliance.

I am requesting \$ _____ from the **County Assistance Office** purchase of _____.

1. Please attach the estimate for all requests.
2. If this is an item that is required for a class, please include documentation from your instructor like a note or syllabus, that the item is **REQUIRED**. *Recommended items are not an allowable request.*
3. If you are requesting a car repair, we must have a copy of **current** Driver's license, **current** insurance and **current** registration or your request will not be processed. If you are using a car that is not in your name, a note must be submitted with request saying you have permission to use this vehicle for school/work purposes. If you are not the owner of the insurance policy on the vehicle, you must provide documentation from the insurance company that you are an insured driver on this vehicle. **NO EXCEPTIONS!!!**
4. If you are requesting a bus pass, we must have a receipt from last month to qualify you for a new one.
5. If you are requesting books, please complete the new book request form and attach to this request. The most cost effective option will be paid for by the CAO, **please note this may be a combination of online and bookstore purchases.**

******Please note if original receipt is not provided to KEYS (do not send receipt to CAO) within 10 days you will be charged back by the CAO.***

Signature _____ Current Phone Number _____