

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 <u>LifelineSupport@usac.org</u> 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	 Tap or click on the web browser on your mobile device or desktop computer. Enter LifelineSupport.org in the web address bar and tap Go/Search on your mobile device or Enter on the keyboard. Then, tap or click Apply Now. 	 ← C ∩
2	Tap or click Get Started to start your application.	 An official website of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government Here's how you know Constant of the United States government here's how you know Constant of the United States government here's how you know Constant of the United States government here's how you know Constant of the United S



3	Fill out your first and last name as it appears on your official documents, like a Social Security Card or State ID.	What is your full legal name? The name you use on official documents, like your Social Security Card or State ID. Not a nickname. First Name Middle Name (Optional) [
4	 Fill out your date of birth. Enter the month. Enter the day. Enter the year. 	What is your date of birth?MonthDayYearMMDDYYYY
5	 Do you want us to check your identity with the last four digits of your Social Security Number? If yes, enter the last four digits of your Social Security Number. If no, select the Number on Tribal ID option and enter your Tribal identification number. 	 How do you want us to check your identity? We'll use this information to see if you're eligible. It won't affect your credit status. Social Security Number (SSN) This is the fastest option if you know the last 4 digits of your SSN. Enter last 4 digits of your SSN XXX - XX - This is required if you're applying for Lifeline. Number on Tribal ID Look for this number on your card or documentation.
6	Fill out your home address.This cannot be a PO Box.	What is your home address? The address where you will get service. Do not use a P.O. Box. You will be able to add a mailing address later. Street Number and Name Apt, Unit, etc. 123 Street Road Image: City Your City or Town State Zip Code 00000 Image: Choose



7	 Do you qualify for Lifeline through a child or dependent? If no, tap or click Next. Go to step 8 to continue. If yes, tap or click Yes, then select Next. Go to step 7a if you qualify through a child or dependent. 	 Do you qualify for Lifeline through your child or a dependent? If you do not qualify on your own, you can sign up for Lifeline through your child or dependent if they participate in any of the qualifying programs. No, I qualify by myself. Yes, I qualify through my child or dependent.
7a	 Fill out your child or dependent's information. You'll need to: Fill out their first and last name. Fill out their date of birth. Verify their identity by using the last four digits of their Social Security Number or a Tribal ID number. Tap or click Next. Go to step 8 to continue. 	<form></form>



8	 Create an account to save your information and continue your application. Enter a username. It can be an email address or a unique ID. Enter a password that is a mix of letters, numbers, and symbols. Type the same password again. 	Choose your username. 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. Username
		(!@#\$%^&*) Type the same password again.
		① No restricted phrases ⑦
9	 Fill out your contact information. Enter your email address. Notifications about your application will go to the email address you share. Enter your phone number (optional). Tap or click the checkbox to enter a mailing address if different from your home address. This can be a PO Box. 	Your Contact Information What is your email address? We will use your email to send you important reminders and information about your application and enrollment. example@email.com I want to provide an alternate email. What is your phone number? (Optional) (() - 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 benefit. For text messages, message and data rates may apply. Text STOP to end messages. Do you want to provide a mailing address? Optional) ? Yes, my mailing address is different than home address



10	 Tell us your preferred language (optional). Tap or click English, Spanish, or Both. 	What is your preferred language? (Optional) We will send you outreach about the status of your application in the language(s) you select. English Español Both
11	 Review the terms and conditions. Tap or click the checkbox to confirm you accept. Tap or click Submit. 	Terms & Conditions By checking this box, I accept the terms and conditions of the National Verifier system. Back
12	Tap or click Start Lifeline Application to continue filling out your application.	My Applications Here are all your applications from the last 180 days. You can start a new application when your last one expires. Return to Application Start Lifeline Application
13	 Tell us how you qualify. Tap or click the checkbox next to all that apply. Tap or click Next. 	Confirm your programs During the following programs do you participate Image:



14	 Review your information. If you need to correct your information, tap or click Edit and make any updates. Review the consent statement and tap or click the checkbox to confirm we can use your information to check if you are eligible. Tap or click Submit. It may take a few minutes to check your information. 	Before we check if you qualify for Lifeline, make sure your information is right. Double check the information below. Eull Legal Name: Test John Date of Birth: January 01, 1980 Last 4 Numbers of SSN: 333 Address: 123 NOT REAL ROAD The information you gave us will be used to check if you qualify for Lifeline. Please confirm that it is okay. Py 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. Back Submit
15	 You'll find out right away if you qualify to get a benefit or if we need more information. Did we ask you to share more information? If yes, tap or click Next and go to the <u>Show You Qualify</u> section. If no, tap or click Next and go to <u>step 16</u>. 	<section-header><section-header><section-header><section-header><list-item><list-item><list-item><list-item><list-item></list-item></list-item></list-item></list-item></list-item></section-header></section-header></section-header></section-header>



16	Read each statement and enter your initials.	l agr state	ee, ui emen	nder penalty of perjury, to the following ts:
		Initi	al	(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).
		Initi	al	agree that if I move I will give my service provider my new address within 30 days.
		Initi	al	 understand that I have to tell my service provider within 30 days if I do not qualify for Lifeline anymore, including: I, or the person in my household that qualifies, do not qualify through a government program or income anymore. 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).
		Initi	al	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. ⑦
		Initi		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.
		Initi	al	All the answers and agreements that I provided on this form are true and correct to the best of my knowledge.
		Initi	al	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.
		Initi	al	My service provider may have to check whether I still qualify at any time. If I need to recertify my Lifeline benefit, Lunderstand that I have to respond by the deadline or I will be removed from the Lifeline Program and my Lifeline benefit will stop.
		Initi	al	If I am seeking to qualify for Lifeline as an eligible resident of Tribal lands, live on Tribal lands, as defined in 54.400(e) of the Lifeline rules. (?)
17	Finish your application.	X	<u>.</u>	
	• Enter your first and last name.	YOUГ Туре уо	Signa ur full leg	ature sal name below
	 Tap or click the checkbox to confirm you understand this is a digital signature. 	Test Joh	n nderstand n.	this is a digital signature, and is the same as if I signed my name with a
	• Tap or click Submit .	Back		Submit



18	 Your application is approved! <u>Contact a participating phone or</u> <u>internet company</u> to get your benefit. 	Contact a phone or internet company to get your benefit You're approved to get your Lifeline benefit. Sign up by March 25, 2025.		
	 Sign up by the deadline or you'll need to re-apply. 	What to do next If you already have service 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." If you don't currently have service Find a phone or internet company in your area and say, "I have been approved for the Lifeline program and would like to sign up for service." Application ID: Q90774-69740 Full legal name Test John Address: 123 Not Real Road, Town, D C11111 Method of identify verification: Last 4 digits of SSN		



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 <u>English</u> and <u>Spanish</u>).

What to do if you need to show us	What the steps look like
 Proof of your address You may be asked to confirm your address by locating where you live on the map. Show us where you live. Tap or click on the map to move the pin to your address, or use the (+) button to zoom in. Tap or click on the pin once you have found your address on the map. Tap or click Next. 	<section-header><section-header><section-header><section-header><section-header><section-header><section-header><text><text><text><text><text></text></text></text></text></text></section-header></section-header></section-header></section-header></section-header></section-header></section-header>
Proof of your household You may be asked to confirm if your household qualifies for the Lifeline benefit.	Confirm your household Someone at your address already receives the Lifeline benefit. You may still qualify. We need to ask a few more questions to better understand your household.
 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. Answer the questions. 	Do you share money (income and expenses) with another adult who gets Lifeline? Yes No Yes No You have until April 7, 2025 to complete this selection. If you do not complete it by this date, you will need to submit a new application. Back Next



Proof of your Social Security Number	Share proof of your Social
You may be asked to share a document to confirm	Security number (SSN)
your Social Security Number.	Your document must include:
• Share a document that includes:	Your first and last name: Test John
1. Your first and last name.	The last four digits of your Social Security number: xoor-xx-3333
2 The last four digits of your Social	
Security Number.	Here are common examples: A Social Security Card A Social Security Card
• Tap or click Take a photo or Choose a file	A W-2 from the last 2 years Andro year's state federal or Tribal tay return
to attach a photo or copy of the document.	riphor year 2 alate, reactar or molar law recom
• Tap or click Next .	
	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 your base apped lighting
	Charge a file
	Back
Proof of your Tribal ID Number	Share proof of your Tribal ID
You may be asked to share a document to confirm	Number
your Tribal ID number.	Your document must include:
• Share a document that includes:	Your first and last name: Test John
1. Your first and last name.	Your Tribal ID Number: 333333
2 Your Tribal ID number	
Tap or click Take a photo or Choose a file	Here are common examples:
• Tap of click Take a plicto of clicose a lite	An official certificate or letter from your tribe's enrollment office A certificate of Decrea of Indian Blood (CDB)
Tap or click Next	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 cides
	Make sure you have good lighting
	Choose file
	Back



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 Hease attach a picture or scanned copy of your document. Files must be less than 10 MB and one of the following file types; jpg. jpg. pg. pg. do g of g.t. 4. Wake sure your image is not blurry Make sure your document is not cut off and we can see all four sides 5. Make sure you have good lighting Choose a file
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 life types; jpg, jpg, 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 Back



Proof of your eligibility	Share more information to see if
You may be asked to share documents that confirm your eligibility (such as your income or participation in a government program).	you qualify With your help, we can confirm you qualify in a few more steps. Do you have a document that shows your income?
Choose how you qualify.Tap or click Next.	 Yes. I have a document such as pay stubs, last year's tax return, or a social security statement. No. But I have a document that shows I (or my child or dependent) participate in a program such as SNAP or Medicaid.
Proof of your income	Share more information to see if
To show proof of your income , you'll:	you qualify based on income
 Tell us how many people live in your household. 	You may qualify if your annual income meets certain requirements.
 Confirm if your annual income is at or below the amount shown. 	Number of people in my nousehold:
 Share a document that includes: 	Yes
 Your name or your dependent's name, 	No. But I have a document that shows I (or my child or dependent) participate in a program such as SNAP or Medicaid.
2. Your annual income,	Back
 An issue date within the last 12 months. 	
Proof of your program participation	Share proof of your program
To show proof of your program participation , you'll:	participation
• Tell us which program you participate in.	Which program do you, your child or dependent take part in?
• Share a document that includes:	You must provide proof of participation for the program you choose.
 Your name or your dependent's name, 	Medicaid Supplemental Security Income (SSI) Federal Housing Assistance ()
2. The name of the program,	Veterans Pension and Survivors Benefit Programs
 The name of the government, Tribal entity, or program administrator that issued the document, 	 Tribal Specific Program (only choose if you live on Tribal lands) I don't think I (or my child or dependent) participate in any of these programs, but I may qualify through my income.
4. An issue date within the last 12 months or expiration date in the future.	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.



- Read each statement and enter your in •
- Enter your first and last name. •
- Tap or click the checkbox to confirm yo understand this is a digital signature.
- Tap or click Submit. ٠

The final step is to certify and sign the application form.	I agree, under penalty of perjury, to the following statements:
• Read each statement and enter your initials.	Initial I (or my dependent or other person in my household) currently get benefits from the government programis) listed on this form or my annual household income is 133% or test han the Federal Poverty Guidelines (the amount listed in the Federal Poverty Guidelines table on
Enter your first and last name.	Initial lacree that If I move I will give my service provider my new address
 Tap or click the checkbox to confirm you understand this is a digital signature. 	within 30 days.
• Tap or click Submit .	Initial Funderstand that I have to tell my service provider within 30 days if I do not qualify for Lifeline arymore, including; 1. I, or the person in my household that qualifies, do not qualify through a government program or income arymore. 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 broadband internet service).
	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
You have submitted your application!	We are reviewing your
We'll email you when our review is complete with instructions on what to do next.	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