

FREE ENROLLMENT ASSISTANCE



COMMUNITY HEALTH INITIATIVE
OF ORANGE COUNTY

APPLY FOR:

- ✓ Medi-Cal

- ✓ Covered California

- ✓ Kaiser Child Health Plan

- ✓ CalFresh
(Food Stamps)

- ✓ CalWORKS
(Cash Aid)

REQUIRED DOCUMENTS

(FOR SOME PROGRAMS)

- ✓ Proof of Income
- ✓ Birth certificate
- ✓ Proof of Address
- ✓ Identification Card
- ✓ Proof of Citizenship
- ✓ Social Security Card
- ✓ Immunization Record
- ✓ Proof of Pregnancy

CHI OC is a Non-Profit Organization DBA CHI OC Helping Families Insurance Agency #0M49070

FOR MORE INFORMATION, CALL:
1-855-927-8333

We thank our partners:



AYUDA GRATUITA PARA INSCRIBIRSE



COMMUNITY HEALTH INITIATIVE
OF ORANGE COUNTY

APLIQUE PARA:

- ✓ Medi-Cal

- ✓ Covered California

- ✓ Kaiser Child Health Plan

- ✓ CalFresh
(Estampillas de Comida)

- ✓ CalWORKS
(Asistencia Monetaria)

DOCUMENTOS NECESARIOS

(PARA ALGUNOS PROGRAMAS)

- ✓ Prueba de Ingresos
- ✓ Acta de Nacimiento
- ✓ Comprobante de Domicilio
- ✓ Tarjeta de Identificación
- ✓ Prueba de Ciudadanía
- ✓ Tarjeta de Seguro Social
- ✓ Tarjeta de Vacunas
- ✓ Comprobante de Embarazo

CHI OC es una organización sin fines de lucro DBA CHI OC Helping Families Insurance Agency #0M49070

Agradecemos a nuestros socios:

LLAME PARA MÁS INFORMACIÓN:
1-855-927-8333

