DRUG-RELATED FELONY/FLEEING FELON REVIEW

DEPARTMENT OF HUMAN SERVICES
ECONOMIC ASSISTANCE OFFICE
SFN 376 (Rev. 3-2012)

If an individual reports he/she has been convicted of a drug-related felony or reports he/she is a fleeing felon, complete the following information and fax or mail this sheet along with copies of the Criminal Complaint and Judgment or Order to the address listed below.

Program ☐ TANF ☐ SNAP	Review Type ☐ Drug Related Felony ☐ Fleeing Felon		
Client Full Name Including Middle Name			
Date of Birth	Gender ☐ Male ☐ Female	Case Number	Client Identification Number
County		Eligibility Worker (Full Name)	
Application Date		Is this an expedited application for SNAP? ☐ Yes ☐ No	
Date Case Must be Processed			

North Dakota Department of Human Services
Economic Assistance Office
600 East Boulevard Ave - Dept 325
Bismarck, ND 58505-0250
(701) 328-2332
Fax (701) 328-1060