(b) Under paragraph (a) of this section, any of the following may apply for benefits on behalf of another person: relatives, interested individuals, social services agencies, law enforcement agencies, courts, or other persons or agencies.

§ 20.601 How can applications be submitted?

You can apply for financial assistance or social services under this part by:
(a) Completing an application that you can get from your social services worker or tribe; or
(b) Through an interview with a social services worker who will complete an application for you based on the oral interview.

§ 20.602 How does the Bureau verify eligibility for social services?
(a) You, the applicant, are the primary source of information used to determine eligibility and need. If it is necessary to secure information such as medical records from other sources, you must authorize the release of information.
(b) You must immediately report to your social services worker any changes in circumstances that may affect your eligibility or the amount of financial assistance that you receive.

§ 20.603 How is an application approved or denied?
(a) Each application must be approved if the applicant meets the eligibility criteria in this part for the type of assistance requested and all recipients will be redetermined for eligibility every 6 months. Financial assistance will be made retroactive to the application date.
(b) An application must be denied if the applicant does not meet the eligibility criteria in §§20.300 through 20.516.
(c) The social services worker must approve or deny an application within 30 days of the application date. The local social services worker must issue written notice of the approval or denial of each application within 45 days of the application date.
(d) If for a good reason the social services worker cannot meet the deadline in paragraph (c) of this section, he or she must notify the applicant in writing of:
(1) The reasons why the decision cannot be made; and
(2) The deadline by which the social services worker will send the applicant a decision.


§ 20.604 How is an applicant or recipient notified that benefits or services are denied or changed?
If the Bureau increases, decreases, suspends, or terminates financial assistance, the social services worker must mail or hand deliver to the applicant or recipient a written notice of the action. The notice must:
(a) State the action taken, the effective date, and the reason(s) for the decision;
(b) Inform the applicant or recipient of the right to request a hearing if dissatisfied with the decision;
(c) Advise the applicant or recipient of the right to be represented by an authorized representative at no expense to the Bureau;
(d) Include the address of the local Superintendent or his/her designated representative to whom the request for a hearing must be submitted;
(e) Advise the applicant or recipient that failure to request a hearing within 20 days of the date of the notice will cause the decision to become final and not subject to appeal under 25 CFR part 2; and
(f) Be delivered to the applicant 20 days in advance of the effective date of the action.

§ 20.605 What happens when an applicant or recipient appeals a decision under this subpart?
If you are an applicant or recipient and appeal a decision made under §20.604, you can continue to receive your assistance while your appeal is pending. For this to happen, you must submit your appeal by the deadline in §20.604(e).

§ 20.606 How is an incorrect payment adjusted or recovered?
(a) When an incorrect payment of financial assistance has been made to an