



1. Visit

<https://abe.illinois.gov/abe/access/jsp/access/Home.jsp>, and choose Apply for Benefits.

2. Choose “Start a New Application”, and then Next.

3. Choose “Create an account” and follow the directions to have an account set up.

4. You will see this prompt notifying you that your account was created, with a link to log in.

- Congratulations! You have created an account **mlittman**.

- Next Step To start working on your application, you will need to [log in to the ABC system](#) using your new user ID and password. Note: Please remember to submit your application using this newly created account.

5. Once logged in, you will be taken to a screen to fill out the Head of Household information.

Children are eligible for P-EBT benefits if they would have received free or reduced-priced lunch if school was in session. The Primary Applicant would be you Head of Household completing the Application and in charge of the benefits. If you receive SNAP benefits you do NOT need to apply for P-EBT. You will be issued benefits systematically. There is a maximum of 10 children per application. If you have more than 10 children, please submit a 2nd application with the additional children.

Primary Applicant

* First Name : Middle Initial : * Last Name : Suffix :

* Gender : Male Female

* Date of Birth : MM / DD / YYYY

Social Security Number : - -

Please Confirm Social Security Number : - -

Note: Providing an SSN will allow for automatic processing of your application. If eligible, providing an SSN also allows you to use self-service functionality to activate and maintain your EBT account. If SSN is not provided, your application will have to be reviewed manually (please allow for additional processing time).

* How many children in your household are receiving free or reduced-price lunch?

There is a maximum of 10 children per application. If you have more than 10 children, please submit a 2nd application with the additional children.

Where You Live

* Street Address :

* City : * State : * Zip Code :

* What county do you live in?

I am homeless right now. If you are homeless fill out a mailing address instead of this address.

6. You will then need to fill out information for each child that you are applying for. Choose your school name under "What school district does this child attend?"

- Child Receiving Free/Reduced Free Lunch Please enter Name, Gender, and Date of Birth as it appears in school records in order to verify eligibility.

* First Name : Middle Initial : * Last Name : Suffix :

* Gender : Male Female

* Date of Birth : MM / DD / YYYY

* What school district does this child attend

If you do not know your school district, go to the ISBE website for more information.

* What school does this child attend

* Is this child receiving free or reduced-price lunch? Yes No

Social Security Number : - -

Please Confirm Social Security Number : - -

Note: Providing an SSN will allow for automatic processing of your application. Children without an SSN receiving free or reduced-price lunch will still be eligible for P-EBT benefits. If SSN is not provided, your application will have to be reviewed manually (please allow for additional processing time).