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GENERAL INFORMATION							
APPLICANT				CO-APPLICANT			
Name				Name			
Date of Birth		Last 4 of your SSN (optional)		Date of Birth		Last 4 of your SSN (optional)	
Home/Cell Phone		Work Phone		Home/Cell Phone		Work Phone	
				Euroll Ad			
Email Address				Email Address			
APPLICANT							
Total Number of people in your household				Annual Household Income			
Family Status			Current Address				
	Single Married						
	Divorced			Street			
	Widowed						
	Female Head of Househol	d		City	Stat	e Zip	
Male Head of Household					Stat		
Race and Ethnicity (select as many as apply)       Single Race       Multi-Race				Ethnicity	,	Other:	
	American		American		Hispanic or Latino	other.	
	Indian/Alaskan Native		Indian/Alaskan		Not Hispanic or		
	Asian		Native		Latino		
	Black or African		Asian				
	American Native Hawaiian or		Black or African American				
	Other Pacific Islander		Native Hawaiian				
	White		or Other Pacific				
			Islander				
			White				
-	Level of Education Complete	ed (select o	one)				
	Grade K-5			Some College			
	Grade 6-8 Some High School			<ul> <li>Two Year Degree</li> <li>College Graduate (4 year college)</li> </ul>			
	High School Diploma/GED				Attended Graduate S		
	5 I ,				Graduate Degree		
Have you owned a home in the last 3 years?							
	NO						
YES If yes, when?							
APPLICANT EMPLOYER Employer Name				CO-APPLICANT EMPLOYER Employer Name			
Employe	eriname			Етпріоуе	rindifie		
Dates Employed				Datas F-	anloyed		
				Dates En	ιριογεα		

APPLICANT								
MONTH	LY ASSISTANCE Do you utilize any of the following?							
	Food stamps (SNAP)	Free or reduced school lunch						
	TANF	Energy assistance						
	WIC	Vocational Rehabilitation						
	Public Housing	Head Start						
OTHER INFORMATION								
Do you have any past due bills?								
In the pa	ast 7 years have you filed a petition of bankruptcy?							
	NO							
	YES If yes, when?							
In the past 5 years have you had anything repossessed?								
	NO YES If yes, when?							
	a co-signer on any other loans?							
	NO							
	YES If yes, what loans?							
Do you l	have any collections, garnishments, or judgements?							
	NO							
	YES If yes, please list							
Are you currently enrolled in an IDA (Individual Development Account)?								
	NO							
	YES If yes, with which organizat							
	Reduce debt	Home ownership     Start a business						
	Increase savings IDA	<ul> <li>Start a business</li> <li>Other:</li> </ul>						
		TURES						
The infor		and correct to the best of my knowledge. I understand that this information						
is necess	ary to evaluate my financial needs and that providing false inform	ation may result in disqualification from this and other programs sponsored						
	ncent de Paul Society of Lane County.							
APPLICA	ANT SIGNATURE	CO-APPLICANT SIGNATURE						
DATE		DATE						
ALL INFORMATION IN YOUR APPLICATION IS SUBJECT TO VERIFICATION								
Please tell us about yourself, your family, and your financial goals:								