**Applicant’s Name** (First, Middle, Last)

# Street Address City Zip Code

**Birth Date** (mm/dd/yyyy) **Phone Email**

|  |  |  |  |
| --- | --- | --- | --- |
| **Education:** | Grades 0-8 | Grades 9-12 / Non-Grad | High School Grad / GED |
|  | 12 grade + some post-secondary | 2 or 4 year College Grad | Other post-secondary Grad |

|  |  |  |
| --- | --- | --- |
| **Gender** Male FemaleGenderqueer Non-binary Transgender Prefer not to say**Approximate Income:****$ per month Ethnicity** (**Must** check one)Hispanic, Latino, or Spanish OriginsNot Hispanic, Latino, or Spanish Origins**Race**American Indian or Alaska Native AsianBlack or African AmericanNative Hawaiian or Pacific Islander WhiteOTHERMulti-Race - 2 or more of the above**Household Type**Single PersonTwo Adults, NO Children Single Parent - Female Single Parent – Male Two Parent HouseholdNon-related Adults with ChildrenMulti-generational Household Other Household Arrangement | **Housing Means**OwnRentOther permanent housing HomelessOther**Disabled?** Yes No**Health Insurance**NONEMedicaid MedicareState Children’s Health Insurance State Health Insurance for Adults Military Health Care Insurance Direct-PurchaseEmployment Based Insurance**Work Status** Employed Full-Time Employed Part-TimeMigrant/Seasonal Farm Worker Unemployed (Less than 6 mo.) Unemployed (More than 6 mo.) Unemployed (Not in Labor Force) RetiredCurrently In School**Military Status**Veteran Active MilitaryNo Military Service | **Income Source** (  A**ll** that Apply) TANFSSI SSDISocial Security Retirement PensionPrivate Disability InsuranceVA Disability (service-connected)VA Disability (non-service-connected) Child SupportAlimony / Spousal Support Unemployment Insurance Earned Income Tax Credit General AssistanceOther**Non-Cash Benefits** (  A**ll** that Apply) SNAP / CAL FRESHWIC LIHEAPHousing Choice Voucher Public HousingPermanent Supportive Housing HUD-VASHChildcare Voucher Affordable Care Act Subsidy OTHER**Pets**# of Dogs: # of Cats:  |

# Others Living in Household

**Name** (First, Middle, Last) **Birth Date** (mm/dd/yyyy) **Gender**

|  |  |  |  |
| --- | --- | --- | --- |
| **Education:** | Grades 0-8 | Grades 9-12 | HS Grad / GED |
|  | 12 Grade plus | 2 or 4 yr. college graduate | Another graduate. |

**Relationship: In School? ** Yes  No **Working? ** Yes  No

**Name** (First, Middle, Last) **Birth Date** (mm/dd/yyyy) **Gender**

|  |  |  |  |
| --- | --- | --- | --- |
| **Education:** | Grades 0-8 | Grades 9-12 | HS Grad / GED |
|  | 12 Grade plus | 2 or 4 yr. college graduate | Another graduate. |

**Relationship: In School? ** Yes  No **Working? ** Yes  No

**Name** (First, Middle, Last) **Birth Date** (mm/dd/yyyy) **Gender**

|  |  |  |  |
| --- | --- | --- | --- |
| **Education:** | Grades 0-8 | Grades 9-12 | HS Grad / GED |
|  | 12 Grade plus | 2 or 4 yr. college graduate | Another graduate. |

**Relationship: In School? ** Yes  No **Working? ** Yes  No

**Name** (First, Middle, Last) **Birth Date** (mm/dd/yyyy) **Gender**

|  |  |  |  |
| --- | --- | --- | --- |
| **Education:** | Grades 0-8 | Grades 9-12 | HS Grad / GED |
|  | 12 Grade plus | 2 or 4 yr. college graduate | Another graduate. |

**Relationship: In School? ** Yes  No **Working? ** Yes  No

**Name** (First, Middle, Last) **Birth Date** (mm/dd/yyyy) **Gender**

|  |  |  |  |
| --- | --- | --- | --- |
| **Education:** | Grades 0-8 | Grades 9-12 | HS Grad / GED |
|  | 12 Grade plus | 2 or 4 yr. college graduate | Another graduate. |

**Relationship: In School? ** Yes  No **Working? ** Yes  No

**Name** (First, Middle, Last) **Birth Date** (mm/dd/yyyy) **Gender**

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| --- | --- | --- | --- |
| **Education:** | Grades 0-8 | Grades 9-12 | HS Grad / GED |
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**Relationship: In School? ** Yes  No **Working? ** Yes  No

**Name** (First, Middle, Last) **Birth Date** (mm/dd/yyyy) **Gender**

|  |  |  |  |
| --- | --- | --- | --- |
| **Education:** | Grades 0-8 | Grades 9-12 | HS Grad / GED |
|  | 12 Grade plus | 2 or 4 yr. college graduate | Another graduate. |

**Relationship: In School? ** Yes  No **Working? ** Yes  No

# Comment / Notes:

I certify that the information I have provided on this form is, to the best of my knowledge, complete and correct.

Client Signature Date