



PROJECT NA' FAN SÁFO INTAKE APPLICATION FORM

Applicant Name: \_\_\_\_\_ | Staff Name: \_\_\_\_\_ | Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_ | Telephone Number: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Does your household meet one of the following housing situations? Check the box that best applies to your situation.

**Economic Hardship** means the household experienced a *recent and significant loss of income*. Situations may include employment termination, loss of income, reduction of hours, leave without pay, medical expenses, funeral expenses (immediate family members), work furlough/suspension, etc.

- My household was evicted from a housing unit (home foreclosure/rental unit) due to economic hardship.
My household will be evicted in 14 days from our current housing unit.
My household is participating in a federally-funded housing program (VASH, Public Housing, Section 8, etc.) and facing eviction due to:
Utility Disconnection (Utility Reimbursement \$ \_\_\_\_\_) Rental Arrears

- My household is currently homeless.
How long has your household been homeless? \_\_\_\_\_
Where are you staying? \_\_\_\_\_
How did your household become homeless? \_\_\_\_\_

ALL APPLICANTS:

- Are you fleeing or attempting to flee domestic violence, dating violence, sexual assault, stalking, or other dangerous or life threatening conditions related to violence? YES NO
Have you applied for Section 8? YES NO
If yes, have you been approved? YES NO UNKNOWN
Any adults in the household currently working? YES NO
Any adults in the household looking for work? YES NO

I HEREBY CONFIRM THAT ALL INFORMATION PROVIDED IS COMPLETE AND CORRECT:

Applicant Name: \_\_\_\_\_ | Applicant Signature: \_\_\_\_\_ | Date: \_\_\_\_/\_\_\_\_/\_\_\_\_