



PO Box 494  
Logansport, IN 46947  
574-516-2407

FOR OFFICE USE ONLY:

Date Received: \_\_\_\_\_ Notes: \_\_\_\_\_

Partner Family ID: \_\_\_\_\_

**PRE-APPLICATION FOR HABITAT HOUSING**

The information contained in this pre-application will remain strictly confidential. It will be available to members of the staff, Family Selection Team, Board of Directors, the Family Support Team, and the financial counselor.

**APPLICANT INFORMATION**

<b>Applicant Name:</b> (Last) _____ (First) _____ (Middle) _____	
Date of Birth: _____ Social Security Number: _____ Married / Separated / Unmarried (circle)	
Address: (Street/P.O. Box) _____ City: _____ Zip: _____	
Previous address: _____ City: _____ Zip: _____	
E-mail address: _____ Phone Number: _____	
<u>Income Information:</u> Present Employer: _____ Length of time: _____	
Previous Employer: _____ Length of time: _____	
Gross Paycheck: \$ _____ Net Pay: \$ _____ <input type="checkbox"/> Weekly <input type="checkbox"/> Every 2 wks <input type="checkbox"/> Twice / Mo <input type="checkbox"/> Mo	
Other Income: \$ _____ <input type="checkbox"/> Mo <input type="checkbox"/> Wk Source of other income _____	
Food Stamps: \$ _____ Child Support (indicate children): \$ _____	
<b>Co-Applicant Name:</b> (Last) _____ (First) _____ (Middle) _____	
Date of Birth: _____ Social Security Number: _____ Married / Separated / Unmarried (circle)	
E-mail address: _____ Phone Number _____	
<u>Income Information:</u> Present Employer: _____ Length of time: _____	
Previous Employer: _____ Length of time: _____	
Gross Paycheck: \$ _____ Net Pay: \$ _____ <input type="checkbox"/> Weekly <input type="checkbox"/> Every 2 wks <input type="checkbox"/> Twice / Mo <input type="checkbox"/> Mo	
Other Income: \$ _____ <input type="checkbox"/> Mo <input type="checkbox"/> Wk Source of other income _____	
Food Stamps: \$ _____ Child Support (indicate children): \$ _____	
Are you/ both of you a U.S. citizen or permanent resident? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are either of you a veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are either of you currently enrolled in college? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you applied for a Habitat house before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____	
How many people are in your household? _____ # of children _____ What are their ages? _____	
Do they live with you _____	