



# Application Cohort \_\_\_\_\_

Taken by: \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

DOB \_\_\_\_\_ Status: Single / Married / Partner / Separated / Divorced / Widowed

Race/Ethnicity: Asian Black Hispanic Mixed White Other: \_\_\_\_\_

Education: Did Not Graduate / GED / HS Graduate / Certificate / Associate / 4 year / Advanced

**Who lives with you?**

Name	Relationship	Age	Childcare Needed? 6 weeks to age 10
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**Employment**

You: \_\_\_\_\_ Spouse/Other \_\_\_\_\_

**Income Earned**

You: \_\_\_\_\_ Spouse/Other \_\_\_\_\_

**Assistance**

Section 8 \_\_\_\_\_ SNAP \_\_\_\_\_ WIC \_\_\_\_\_ Disability \_\_\_\_\_ Unemployment \_\_\_\_\_ Child Support \_\_\_\_\_

Do you have your own transportation? Yes No

Are you willing to submit to a background check? Yes No

Will you commit to attend Feb 6 – Apr 29? Yes No

Will you commit to arrive by 5:30 each week? Yes No

Health: Do you have any physical or mental health limitations you would like to share with us?

