

FINANCIAL FITNESS PROGRAM INTAKE FORM

Date of class you are signing up for: _____ Location: _____

CUSTOMER 1

Please Print Clearly

Name: _____
First MI Last

Address: _____
Street Address PO Box City State Zip Code

Home Phone: (____) _____-_____ Work Phone: (____) _____-_____

Mobile/Cell: (____) _____-_____ Email: _____

_____-_____-_____/_____/_____
 Social Security Number Birth Date

Ethnicity (Select both a "Race" and a "Yes" or "No" for Hispanic origin:)

1. Race (please circle):

- | | | | |
|---|---|-----------------------------------|----------|
| 1. White | 2. Black or African American | 3. American Indian/Alaskan Native | 4. Asian |
| 5. Native Hawaiian/Other Pacific Islander | 6. American Indian/Alaskan Native & White | 7. Asian & White | |
| 8. Black/African American and White | 9. American Indian/Alaskan Native & Black | 10. Other | |

2. Hispanic (please circle): Yes No

3. Are you a Veteran? (please circle): Yes No

4. Are you a first Time Buyer (you do not currently own a home and have not owned a home in the past three years)? Yes No

5. Gender (please circle): Male Female

6. Marital Status (please circle): 1. Single 2. Married 3. Divorced 4. Separated 5. Widowed

7. Current Housing Arrangement (please circle):

- | | | |
|----------------------------|-------------------------------------|---|
| 1. Rent \$ _____ per month | 2. Homeless | 3. Homeowner with mortgage \$ _____ per month |
| 4. Do not pay rent | 5. Homeowner with mortgage paid off | |

8. Household Type (please circle the most accurate):

- | | | |
|--|--|-------------------------------|
| 1. Female headed single parent household | 2. Male headed single parent household | 3. Single adult |
| 4. Two or more unrelated adults | 5. Married with dependents | 6. Married without dependents |
| | | 7. Other |

9. Annual Family Income: \$ _____

10. Family Size: _____ **How many dependents (other than those listed by any co-borrower)?** _____

What ages are they? ____, ____, ____, ____, ____, ____, ____, ____, ____, ____, ____

11. Were you born in the United States? (please circle): Yes No

12. Education (please circle one):

- | | | |
|------------------------------|--------------------------------------|-------------------------|
| 1. Below High School Diploma | 2. High School Diploma or Equivalent | 3. Two-Year College |
| 4. Bachelors Degree | 5. Masters Degree | 6. Above Masters Degree |

13. What is your primary language? _____

14. Is the primary applicant the Head of the Household? (please circle) Yes No

15. Are you Disabled? (please circle): Yes No

16. Are you a Farm worker? (please circle): Yes No

17. How did you hear about us? _____



Name: _____
First MI Last

Address: _____
Social Security Number Street Address PO Box City State Zip Code

Home Phone: (____) _____ - _____ Work Phone: (____) _____ - _____ Email: _____
_____/_____/_____ Gender (please circle): Male Female

Birth Date

1. Marital Status (please circle): 1. Single 2. Married 3. Divorced 4. Separated 5. Widowed

2. Relationship to Customer 1 (please circle): Child Friend Grandparent Parent
Partner Relative, other Sibling Spouse

3. Are you Disabled? (please circle): Yes No

Ethnicity (Select both a "Race" and a "Yes" or "No" for Hispanic origin:)

4. Race (please circle):

- 1. White
- 2. Black or African American
- 3. American Indian/Alaskan Native
- 4. Asian
- 5. Native Hawaiian/Other Pacific Islander
- 6. American Indian/Alaskan Native & White
- 7. Asian & White
- 8. Black/African American and White
- 9. American Indian/Alaskan Native & Black
- 10. Other

5. Hispanic (please circle): Yes No

6. Were you born in the United States? (please circle): Yes No

AUTHORIZATION

I/We authorize Umpqua Coastal Housing Center (UCHC) & Umpqua Community Development Corporation (UCDC) to:

- (a) pull my/our credit report to review my/our credit file for housing counseling in connection with my pursuit on a loan to purchase real property;
- (b) pull my/our credit report and review my/our credit file for informational inquiry purposes; and
- (c) obtain a copy of the HUD-1 Settlement Statement, Appraisal, and Real Estate Note(s) when I/we purchase a home, from the lender who made me/us a loan and/or the title company that closed the loan.

I/We understand that any false or fraudulent information contained on this form may result in civil liability and/or criminal liability under the provisions of Title 18, United States Code, Section 1001.

CUSTOMER 1 Date

CUSTOMER 2 Date

Registration and class fee (\$30.00) is required prior to attending class. Please return your completed registration form no later than: Five Days Prior To The Class Date to our office at:

**Umpqua Coastal Housing Center
1984 Sherman Ave. North Bend, OR 97459**

Please make sure to have check payable to: **SOC HOP - Umpqua Coastal Housing Center**

Registration Policy: We have a no refund policy. If you for any reason you can not make it to the class, please call two days prior to reschedule for another class.

