|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Applicant Information | | | | | |
| (Please print) | | | | | |
| Borrower Information | | | | | | |
| First Name, Middle Initial, Last Name (include Jr. or Sr., if applicable): | | | | | | |
| Cell Phone | | | Home Phone | | | |
| Social Security Number | | DOB | | Do you have a Co-Borrower: Yes or No  If so who: | | |
| Marital Status  Married Single Separated Divorced Widowed | **Age** of each minor child (17 years or younger) | | | | | |
| Gender | Preferred Language | | | | | |
| Mailing Address (PO Box, city, state, ZIP) | | | | | Own  Rent  Living with relatives  Other | |
| Physical Address (Street, city, state, ZIP) | | | | | No. of Years | |
| **County of residence** | | | | | **Community** | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **If residing at present address for less than two years, complete the following (Need five years of history, use Continuation Sheet):** | | | | |
| Former Mailing Address (PO Box, city, state, ZIP) | | | | Own  Rent  Living with relatives  Other | |
| Former Physical Address (Street, city, state, ZIP) | | | | No. of Years | |
| **County of residence** | | | | **Community** | |
| **Tribal District** | | | | | |
| **E-mail Address** | | | | | |
| **Preferred Type of Contact** | | | | | |
| **Are you enrolled: Tribal affiliation and enrollment number:** | | | | | |
| **How did you hear about the program?**    \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | |
| **Race** | **Ethnicity** | | | | |
| **Citizenship** | **Household Information** | | | | |
| **EMPLOYMENT INFORMATION** | | | | |
| **If employed in current position for less than two years or if currently employed in more than one position, complete the following:** | | | | |
| Name & Address of Employer | | |  | | | |
| Position/Title/Type of Business | | | Dates (from – to) | | | |
| Hourly Wage | | Business Phone | | | | |
| **EMPLOYMENT INFORMATION (Continued)** | | | | |
| **If employed in current position for less than two years or if currently employed in more than one position, complete the following:** | | | | |
| Name & Address of Employer | | |  | | | |
| Position/Title/Type of Business | | | Dates (from – to) | | | |
| Hourly Wage | | Business Phone | | | | |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **EDUCATION INFORMATION**  Check the highest grade completed in school:  1 2 3 4 5 6 7 8 9 10 11 12 13 14 15  16 17 18 | | | | | | | |
|  | **Name of School** | **City/State** | **Did you graduate?** | **If NO, # of years left** | **Degree Received** | **Year graduated** | |
|  | High School: |  |  |  |  |  | |
|  | GED: |  |  |  |  |  | |
|  | Other School: |  |  |  |  |  | |
|  | College: |  |  |  |  |  | |
|  | Vocational/Technical: |  |  |  |  |  | |
| **MILITARY INFORMATION** | | | | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Branch:   Army  Navy  Air Force   Marines National Guard  Coast Guard | Duty Status:  Active Reserve Veteran | | From: \_\_\_\_\_\_\_ To: \_\_\_\_\_\_\_\_\_ | |
| Rank at Discharge: | | Type of Discharge:  Honorable Dishonorable General Other than Honorable Bad Conduct | | Do you have the following documents?  DD214 Certificate of Eligibility |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **FINANCIAL INFORMATION** | | | | | | | | | | | | |
| **MONTHLY INCOME AND COMBINED HOUSING EXPENSE INFORMATION** | | | | | | | | | | | | |
| Gross Monthly Income | | | Borrower | | TOTAL | | Combined Monthly Housing Expense | | Present | Proposed | | |
| Base Employment Income | | | $ | | $ | | Rent | | $ |  | | |
| Overtime | | |  | |  | | First Mortgage (P&I) | |  | $ | | |
| Bonuses | | |  | |  | | Other Financing (P&I) | |  |  | | |
| Commissions | | |  | |  | | Hazard Insurance | |  |  | | |
| Dividends/Interests | | |  | |  | | Real Estate Taxes | |  |  | | |
| Net Rental Income | | |  | |  | | Homeowner Assn. Dues: | |  |  | | |
| Other (before completing see the notice in “describe other income” | | |  | |  | | Other | |  |  | | |
|  | |  | | Other | |  |  | | |
| **TOTALS** | | | **$** | | **$** | | **TOTAL** | | **$** | **$** | | |
| \* Self Employed Borrower(s) may be required to provide additional documentation such as tax returns and financial statements: | | | | | | | | | | | | |
|  | | **Describe Other Income**  **Notice: Alimony, child support or separate maintenance incomes need not be revealed if you choose not to have it considered for repaying this loan.** | | | | | | | | | | **MONTHLY AMOUNT** |
|  | |  | | | | | | | | | |  |
|  | |  | | | | | | | | | |  |
|  | |  | | | | | | | | | |  |
| **SALARY DEDUCTION INFORMATION** | | | | | | | | | | | | |
|  | Vendor | | | Original Amount | | Bi-Weekly Payment | | Balance Owing | | | Reoccurring | |
|  |  | | |  | |  | |  | | |  Yes No | |
|  |  | | |  | |  | |  | | |  Yes No | |
|  |  | | |  | |  | |  | | |  Yes No | |
|  |  | | |  | |  | |  | | |  Yes No | |
|  |  | | |  | |  | |  | | |  Yes No | |