



Housing Counseling Request for Services

Date _____

Name: _____ Date of Birth: _____

Address: _____ County: _____

City: _____ Idaho, Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

- Hispanic
- Non-Hispanic
- Choose Not to Respond

- Female
- Male

Race:

- White/Caucasian
- American Indian/Alaskan Native
- Native Hawaiian/Pacific Islander
- Asian and White
- American Indian/Alaskan Native and Black
- Black or African American
- Asian
- American Indian/Alaskan Indian and White
- Black/African American and White
- Other

Disabled? Yes No

Household Type:

- Single
- Married
- Divorce

Family Size: _____

Education:

- Elementary
- High School
- University
- Other
- Junior High
- Junior College
- Graduate School

Monthly Liabilities: \$ _____

Please list all Income for your household:

Family Member Name	Source of Income	Date Employment Began	Hours per week	Rate of Pay	Gross per year	Medical Benefits? Yes or No
	Total Annual Income					

Are you a first time Homebuyer (you have not owned any portion of a home within the past three years)

Yes No

Housing Related Purpose of this visit:

Current Housing Arrangement:

- | | |
|---|---|
| <input type="checkbox"/> Rent | <input type="checkbox"/> Homeless |
| <input type="checkbox"/> Homeowner with Mortgage | <input type="checkbox"/> Living with Family or friend and not paying rent |
| <input type="checkbox"/> Homeowner with paid off mortgage | <input type="checkbox"/> Other |

How did you learn about IHFA Housing Counseling:

- | | |
|---|---|
| <input type="checkbox"/> HUD Website | <input type="checkbox"/> IHFA Advertisement: |
| <input type="checkbox"/> <i>Finally Home!</i> Class | <input type="checkbox"/> Newspaper article |
| <input type="checkbox"/> Lender or Realtor | <input type="checkbox"/> Billboard |
| | <input type="checkbox"/> Radio |
| | <input type="checkbox"/> TV |
| | <input type="checkbox"/> Community Service Provider |
| | <input type="checkbox"/> IHFA Staff person _____ |

Signature

Date