FAITH&FINANCES

APPLICANT INFORMATION

Name:	Male Female (circle one)
Spouse's Name:	
Address:	
City: State:	Zip Code:
Phone: Email:	
Date of Birth:	Spouse's Date of Birth:
Current Employment/Financial Status:	
Check all that apply:	
Unemployed D Full-time job Part-time job D	Disabled Receiving other assistance
If employed, name of employer:	Current income:
Current Marital/ Family/Housing Status:	
Married Single Divorced Separated	Widowed
Do you have children? Yes No	If yes, how many?
Housing Arrangements: Rent Apartment Rent House	Own Home Homeless Other
If other, please explain	<u>.</u>
Faith and Finances Training Information:	
Will you need child care during your Faith and Finances training? Yes No	
Will you need transportation during your Faith and Finances training? Yes \Box No \Box	
What is your reason for taking Faith and Finances?	
Do you currently have a budget?	
Thing you are most interested in learning:	