



HOME BUYER COUNSELING INTAKE FORM

Case Number _____ In- Person counseling
 Date of Intake: _____ Telephone Counseling

Instructions: Please fill out as completely as possible. If you need additional space, please feel free to use the back side or make additional copies as necessary.

Individual #1

Name: _____
 (Please print) First MI Last
 Address: _____
 City: _____ State: _____
 Zip: _____ County: _____
 Home Phone: _____
 Work Phone: _____
 Email: _____

Individual #2

Name: _____
 (Please print) First MI Last
 Address: _____
 City: _____ State: _____
 Zip: _____ County: _____
 Home Phone: _____
 Work Phone: _____
 Email: _____
 Relationship to Individual #1: _____

Individual #1 (only) please continue:

1. How did you hear about this counseling?

- Mailer, Flyer, or Brochure
- Newspaper
- Agency (which one: _____)
- Friend or Relative
- Internet
- Realtor
- Someone who took a workshop
- Lender / Mortgage company
- Other: _____

2. Your ethnicity: Hispanic, Latino, or Spanish Non-Hispanic

3. Race: (select one)

Single Race

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

Multiple Race

- American Indian / Alaskan Native & White
- American Indian / Alaskan Native & Black
- Asian & White
- Black or African American & White
- Native Hawaiian/Other Pacific Islander & Black
- Other race: _____

4. How many people will live in the house? _____

5. Gender: Male Female

Information about Individual #1 (continued):

6. Your age: _____

7. Are you disabled? Yes No

8. Are you a single parent household? Yes No

9. Please check the highest education level you completed:

- Some high school Some college or trade school Bachelor's degree
 High school diploma / GED Associates degree Graduate or professional degree

10. Marital Status: Single Married Divorced Widow

11. Income. Please include income for all individuals from all sources (*work, disability, child support, investment income, etc.*)

Name (person receiving income)	Income Source	Net Monthly Income (after taxes)
		\$
		\$
		\$
		\$

12. Current housing: Rent Own Staying with family / friends

13. Are you a first time home buyer? Yes No (You have not owned a home for the past three years.)

14. Are you a first generation home buyer? Yes No (Your parents did not own their own home.)

15. How many dependent children under 18 years of age live in the house? _____

16. Current household rent / mortgage payment: \$_____ / month.

17. Did you complete a Home Stretch Workshop? No Yes: Location & Dates: _____

18. Have you applied for a mortgage loan or have you signed a purchase agreement? Yes No

19. Have you experienced a home foreclosure within the past 3 years? Yes No

If you answered yes to question 18, please complete the purchase property information for your new home here:

Purchase property address: _____

City: _____ State: _____ Zip: _____ Purchase price: \$ _____

Loan amount: \$_____ Loan interest rate: _____ % Closing date: _____

Lender (Bank/Mortgage Co.): _____ Loan program (FHA, RD, etc): _____