

Don't staple the pages of this application together!

1. Some providers *scan* the application, and if you staple, that means removing staples from 1000 applications every week or month.
2. If you include a letter, don't staple that either: providers need to quickly get to your waitlist data and your cover page just gets in the way.

Use #10 double window envelopes. Fold on the line, and addresses will fit in the windows.

Dear

I am applying to the following waitlist, which I believe is open:

App Generated:

Housing Authority or Management Office Only

Is this waitlist closed? Any other questions or concerns? *Fill in the appropriate circle(s) below and fax this page to HousingWorks at the number below – and we will correct the problem. Hundreds of thousands of applicants check our free website to see what lists are open! Keeping us updated will save you many phone calls, reduces frivolous applications - and takes only 10 minutes a year.*

- This particular waitlist is closed: The only open waitlists we have at present are:**

- This is not the correct application. The correct application is available by/from:**

- Any other info you wish to tell HousingWorks?**

Your position or title at this housing program: _____

Your signature: _____

HousingWorks Fax: 617-536-8516



<input type="radio"/>	Head of Household's FIRST Name
<input type="radio"/>	Head of Household's MIDDLE Name
<input type="radio"/>	Head of Household's LAST Name

<input type="radio"/>	HoH's SOCIAL SECURITY NUMBER	<input type="radio"/>	GENDER	<input type="radio"/>	HoH's DATE OF BIRTH
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<input type="radio"/>	ETHNICITY Also provide your race at right!	<input type="radio"/>	RACE: Asian , Black, White, Native American, Pacific Islander, Multi-racial Do NOT write Spanish, Hispanic, Latino here – and do NOT write your country!
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<input type="radio"/>	YOUR MOTHER'S MAIDEN NAME
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<input type="radio"/>	YOUR HOME TELEPHONE	<input type="radio"/>	SECOND TELEPHONE
<input type="radio"/>	YOUR EMAIL ADDRESS		

CURRENT ADDRESS OR LONG-TERM CONTACT ADDRESS

This is:

<input type="radio"/>	
<input type="radio"/>	

SECOND CONTACT ADDRESS

This is:

<input type="radio"/>	
<input type="radio"/>	

<input type="radio"/>	TOTAL HOUSEHOLD SIZE			<input type="radio"/>	# BEDROOMS	<input type="radio"/>	How much money does your family receive in a year?
	# Adults	# Children	Total #				.0 0

<input type="radio"/>	INCOME SOURCES
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<input type="radio"/>	MOBILE RENTAL ASSISTANCE, if any
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<input type="radio"/>	REQUESTED ACCOMMODATIONS
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<input type="radio"/>	SPECIAL CIRCUMSTANCES THAT <u>SOME</u> PROGRAMS MAY USE TO ASSIGN PRIORITY OR PREFERENCE
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HOME CITY

Name:		Date:
Address:		Apt #
City:	ST:	Zip
SS#	DOB	
Daytime Phone:		Evening Phone:
Email Address:		

Everyone over 18 Years of age must provide the following information.

Name	Date of Birth	SS#
1.		
2.		
3.		
4.		

How many Occupants in Household?	Circle Size of Apartment Needed: 0 BR 1BR 2BR 3BR 4BR
Do you have Section 8 Voucher? Yes _____ No _____	When would you like to move in?

What is the total **Annual Income** of your household? Be sure to include **ALL** income from **ALL** household members.

<u>Source</u>	<u>Annual Amount</u>

Where are you looking? Check **ALL** that you are interested in.

- Springfield - Neighborhood Homes () Tapley Court () Center City ()
- Holyoke - Voces De Esperanza ()

Everyone over 18 years of age needs to sign below and the General Release Form on the next page.

Signature: _____ Date: _____

Signature: _____ Date: _____



