



## Drexel House Pre Application

Last Name	First Name	S.S. #
Are you a veteran?    yes    no	Race	Gender
Date of Birth                      Age	Place of Birth	Total Monthly Income: \$
Is English your second language?    yes    no	If yes, do you need an interpreter?    yes    no	

Telephone #'s: (include message #'s, family, and friends with whom you keep in regular contact with)		
(    )	(    )	(    )
Street Address / Shelter Name	City	Zip
Mailing Address (if different from above)	City	Zip

Are you a single person who is homeless?    yes    no	How long have you been homeless?
Have you recently spent the night on the streets, with friends or family, in a vehicle, in a shelter, or any other kind of temporary housing due to your lack of permanent housing?    yes    no	
Have you paid rent in the last 12 months?    yes    no	If yes, how many times in the last 5 years?
Have you signed any leasing paperwork in the last 12 months?    yes    no	If yes, how many times in the last 5 years?

<p>“Disability” means: A physical or mental impairment that substantially limits one or more of the major life activities of an individual, such as performing manual tasks, walking, seeing, hearing, speaking, breathing, or learning. Do you have any of the above disabilities?    yes    no</p>
Do you need an accessible unit because of physical limitations?    yes    no

Are you receiving any federal or state assistance?    yes    no	If yes, please describe:
---	--------------------------

<i>Please provide the names / phone number of any Agency / Church / Shelter / Advocate you've worked with, below.</i>	
Name:	Phone Number:
Name:	Phone Number:

<p>I understand that this pre-application will be sent to the Housing Authority which co-administers the waiting list. I have received a copy of the application as my proof of submission. If there is any change of address, I understand that I need to submit the change in writing to avoid cancellation of my application from the waiting list. I understand that I may get on other program lists by contacting the Housing Authority for other applications. I authorize the Housing Authority and Drexel House staff to communicate regarding my application. I understand that when my application reaches the top of the list, I will need to complete more detailed paperwork for both the Housing Authority and the Property in order to determine my eligibility for a unit.</p>	
Signature:	Date:

<b>For Staff Use Only</b>	Day Received:	Time:	<input type="radio"/> Shelter <input type="radio"/> Housing
---------------------------	---------------	-------	---



## Income Questionnaire

Are you employed or have a verifiable start date within the next year?	<input type="radio"/> Yes	<input type="radio"/> No
Wage \$ _____ per _____		
Are you presently employed at an additional job (NOT self employed)?	<input type="radio"/> Yes	<input type="radio"/> No
Wage \$ _____ per _____		
Are you self employed?	<input type="radio"/> Yes	<input type="radio"/> No
Monthly Net Income \$ _____		
Are you receiving Social Security (SSA/SSI) or WA State SSI?	<input type="radio"/> Yes	<input type="radio"/> No
Monthly Net Income \$ _____		
Are you currently or do you anticipate receiving child support/alimony?	<input type="radio"/> Yes	<input type="radio"/> No
Monthly Income \$ _____		
Are you receiving public assistance (TANF, ABD, FIP, ADATSA)?	<input type="radio"/> Yes	<input type="radio"/> No
Monthly Net Income \$ _____		
Do you currently receive unemployment, L&I, or disability benefits?	<input type="radio"/> Yes	<input type="radio"/> No
Monthly Net Income \$ _____		
Are you an Armed Forces member (Active, Nat'l Guard, Reserves)?	<input type="radio"/> Yes	<input type="radio"/> No
Monthly Gross Income \$ _____		
Are you receiving income from pension, annuity, retirement, death/VA?	<input type="radio"/> Yes	<input type="radio"/> No
Monthly Gross Income \$ _____		
Are you receiving money regularly from your family, church, friends?	<input type="radio"/> Yes	<input type="radio"/> No
Monthly Gross Income \$ _____		
If you are a student, do you receive financial aid?	<input type="radio"/> Yes	<input type="radio"/> No
Total Amount Received \$ _____		
Do you receive money from a trust fund?	<input type="radio"/> Yes	<input type="radio"/> No
Total # of Funds \$ _____		
Do you have a 401K?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have net income from rental property?	<input type="radio"/> Yes	<input type="radio"/> No
Do you own or are you in the process of selling any real estate?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have income from sources other than listed above?	<input type="radio"/> Yes	<input type="radio"/> No
If yes, please explain: _____		
Do you have any bank accounts?	<input type="radio"/> Yes	<input type="radio"/> No
Savings \$ _____ Checking \$ _____		

**Under penalty of perjury, I certify that the information presented in this application is true and accurate to the best of my knowledge and belief. I further understand that providing false representations herein constitutes an act of fraud. False, misleading, or incomplete information may result in the termination of application and/or prosecution.**



## Waitlist Tracker

### (THIS FORM GOES WITH YOU)

Thank you for your interest in Drexel House.

**You are required to contact us once a month.**

You or your Service Provider must call and leave a voicemail or write a letter once a month to keep your name on the wait list.

If you do not contact us each month your name will automatically be taken off the wait list the last day of the month. Below is a form to help you keep track of when you check in each month.

Every month call **360 753 3340 x 22** and follow the prompts to check in.

**Date Application Submitted** \_\_\_\_\_

**Mark down the date you called in for each month:**

<b>Jan</b> _____	<b>Jul</b> _____
<b>Feb</b> _____	<b>Aug</b> _____
<b>Mar</b> _____	<b>Sep</b> _____
<b>Apr</b> _____	<b>Oct</b> _____
<b>May</b> _____	<b>Nov</b> _____
<b>Jun</b> _____	<b>Dec</b> _____