

ALL ITEMS NEEDED TO PROCESS YOUR APPLICATION

PLEASE CHECK () EACH ITEM AS YOU HAVE COMPLETED IT BEFORE YOU BRING YOUR APPLICATION AND PAPERWORK BACK TO US. THANK YOU!

() VERIFICATION OF INCOME(S) ON APPLICANT AND CO-APPLICANTS:

SSI, VA, DISABILITY, EMPLOYMENT (3-4 RECENT PAYCHECK STUBS), ETC.

FAMILY CONTRIBUTION AFFIDAVIT (MUST BE NOTORIZED!), CURRENT BANK STATEMENTS: CHECKING, SAVINGS, IRA, STOCKS, BONDS, ETC.

() PHOTO ID CARD ISSUED BY THE STATE OR MILITARY, ON APPLICANT AND CO-APPLICANTS.

() MEDICAL; LAST 12 MONTH BILING (I.E. DOCTOR, PHARMACY, HEALTH INSURANCE, HOSPITAL, ETC.)



TDD#s 1-800-947-5277 (V)
1-800-846-5277 (T/A)
"For the deaf and hearing impaired ONLY!"



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