**Homebuyer Counseling Intake Form**

**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.

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**Individual #1**

Name: ____________________________

(Please print) First  MI  Last

Address: ____________________________

City: __________________ State: ______

Zip: ________ County: __________________

Home Phone: ________________________

Work Phone: ________________________

Email: ____________________________

**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

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Homebuyer Counseling Intake Form 2012.2013
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.)

<table>
<thead>
<tr>
<th>Name (person receiving income)</th>
<th>Income Source</th>
<th>Net Monthly Income (after taxes)</th>
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<tbody>
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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? ____________


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 21, please complete the purchase property information for your new home here:

Purchase property address: ____________________________________________________________

<table>
<thead>
<tr>
<th>City: ____________________</th>
<th>State: _________</th>
<th>Zip: __________</th>
<th>Purchase price: $ ____________</th>
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<tr>
<th>Loan amount: $ ____________</th>
<th>Loan interest rate: _______%</th>
<th>Closing date: ___________________</th>
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Lender (Bank/Mortgage Co.): __________________________ Loan program (FHA, RD, etc): __________________________

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Disclosure Statement

While you may learn about the advantages/disadvantages of specific loan products during this counseling session, you are free to choose lenders, loan products and homes of your own choosing regardless of the recommendations made by the counselor. By signing below, you acknowledge that you have received and read this disclosure notice.

________________________________________________         _______________________________________________
Signature, Individual 2                                     Date

______________________________       ______________________________
Signature, Individual 1               Date

Signature, Individual 2               Date