



**APPLICANT**

**EMPLOYMENT — Last 2 Years**

**CO-APPLICANT**

Current Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Ph# \_\_\_\_\_ Date of Hire \_\_\_/\_\_\_/\_\_\_  
 Title \_\_\_\_\_  
 Full-Time or Part -Time

Secondary Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Ph# \_\_\_\_\_ Date of Hire \_\_\_/\_\_\_/\_\_\_  
 Title \_\_\_\_\_  
 Full-Time or Part -Time

Previous Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Ph# \_\_\_\_\_ Date of Hire \_\_\_/\_\_\_/\_\_\_  
 Title \_\_\_\_\_  
 Full-Time or Part -Time

Current Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Ph# \_\_\_\_\_ Date of Hire \_\_\_/\_\_\_/\_\_\_  
 Title \_\_\_\_\_  
 Full-Time or Part -Time

Secondary Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Ph# \_\_\_\_\_ Date of Hire \_\_\_/\_\_\_/\_\_\_  
 Title \_\_\_\_\_  
 Full-Time or Part -Time

Previous Employer \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Ph# \_\_\_\_\_ Date of Hire \_\_\_/\_\_\_/\_\_\_  
 Title \_\_\_\_\_  
 Full-Time or Part -Time

**APPLICANT**

**LIQUID FUNDS/SAVINGS/INVESTMENTS**

**CO APPLICANT**

Checking acct balance \$ \_\_\_\_\_  
 Institution Name \_\_\_\_\_  
 Savings acct balance \$ \_\_\_\_\_  
 Institution Name \_\_\_\_\_  
 CDs \$ \_\_\_\_\_  
 Institution Name \_\_\_\_\_  
 401K/Retirement \$ \_\_\_\_\_  
 Institution Name \_\_\_\_\_  
 Cash \$ \_\_\_\_\_  
 Estimated Annual Income \$ \_\_\_\_\_

Checking acct balance \$ \_\_\_\_\_  
 Institution Name \_\_\_\_\_  
 Savings acct balance \$ \_\_\_\_\_  
 Institution Name \_\_\_\_\_  
 CDs \$ \_\_\_\_\_  
 Institution Name \_\_\_\_\_  
 401K/Retirement \$ \_\_\_\_\_  
 Institution Name \_\_\_\_\_  
 Cash \$ \_\_\_\_\_  
 Estimated Annual Income \$ \_\_\_\_\_

I/We understand that any intentional or negligent representation(s) of the information contained on this form may result in civil liability and/or criminal liability under the provisions of Title 18, United States Code, Section 1001.

\_\_\_\_\_  
*Applicant*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Co-Applicant*

\_\_\_\_\_  
*Date*

**For Internal Use Only**

Notes/Comments: \_\_\_\_\_

Reviewed By: \_\_\_\_\_ Date: \_\_\_/\_\_\_/\_\_\_



Type of Service(s)	
Counseling	
Homebuyer Prep	
Homebuyer	
Financial Fitness	
Refinance	
AMHA/Home for Me	
Other Services	
Post Purchase	