

Furnish A Home Again, INC

Application for Assistance

PLEASE ANSWER ALL QUESTIONS COMPLETELY

Name of Referring Agency/Shelter: _____

Address: _____

Phone: _____

Part I

Applicant's Personal Information

Name: _____

Last First Middle Initial

Address: _____ City/S

tate _____ Zip _____

How long have you resided at this address? _____

List of those that will benefit from our services:

Name	Age	Relationship	Source of Income? If yes, explain

(Shelter Referrals ONLY) Proposed Permanent Address:

_____ City/S

tate _____ Zip _____

(All Applicants) Landlord Signature: _____

Full Name: _____
Last First Middle Initial

Phone: _____

Part II

References

Agency Representative Making Reference: _____

Phone: _____

Recommendation: I hereby recommend _____

to receive assistance in furnishing a permanent home, based on outstanding compliance with our rules/requirements, outstanding endeavor to make improvements in their life, and personal need.

Signature and Title

Employer Making Reference: _____

Phone: _____

Recommendation from Employer:

I hereby recommend _____ to receive assistance in furnishing a permanent home, based on outstanding performance and dedication during their period of employment.

I certify that _____

makes the following wages: _____ and has

been employed from _____ to _____.

Signature and Title

Part III

Items are you in need of?

Please attach a copy of your lease. Call (540) 219-1998 for assistance.