

Date of Application		How Did You Hear About Us?	
Personal Information			
First Name		Last Name	
Preferred Name		Date of Birth MM/DD/YY	Age
Phone		Alternate Phone	
Email		Ok to Text? Ok to Email?	☐ Yes ☐ No ☐ Yes ☐ No
Address		Apt No.	
City, State, Zip		Former Foster Youth?	☐ Yes ☐ No ☐ Prefer Not to Say
Housing Status	☐ Rent/Own ☐ Live With Family/Friends ☐ Sober Living / Treatment Home ☐ Transitional Home ☐ In Custody ☐ Staying in a Shelter ☐ Currently Unhoused ☐ Other _____		
Are You Married?	☐ Yes ☐ No ☐ Prefer Not to Say	Do You Have Children?	☐ Yes ☐ No ☐ Prefer Not to Say If Yes, How Many? _____
Employment Status	☐ Full Time ☐ Part Time ☐ Self Employed ☐ Unemployed ☐ Retired ☐ Student ☐ Medical/Disabled ☐ Gig Work (ex., Uber/Lyft)		
Do You Have Health Benefits?	☐ Yes ☐ No ☐ Partial ☐ Unsure	Do You Have a Disability?	☐ Yes ☐ No ☐ Partial ☐ Unsure
Past/Current Substance Use	☐ Drugs ☐ Alcohol ☐ Both ☐ None	Are You a Veteran?	☐ Yes ☐ No Branch: _____
I Identify with the Following Gender:			
	Female		Male
	Trans Man		Trans Woman
	Gender Queer / Gender Non-Conforming		Different Identity (Please List): _____
	Prefer Not to Say		
Pronouns:	☐ She/Her ☐ He/Him ☐ They/Them ☐ Other: _____		
Please Specify Your Race and/or Ethnicity (select all that apply)			
	African American / Black		Asian
	Caucasian / White		American Indian or Alaska Native
	Hispanic / Latino		Middle Eastern / North African
	Native Hawaiian / Pacific Islander		Two or More Races
	Other (Please Specify) _____		Prefer Not to Say
What is Your Total Annual Personal Income? _____			
Education			
What is the highest grade in school that you completed? ☐ Elementary ☐ Middle School ☐ High School ☐ Some College ☐ Associates Degree ☐ Bachelor's Degree ☐ Master's Degree ☐ Doctorate / Juris Doctorate ☐ Vocational/Licensure			
Did you ever attend special education classes while in school or in custody? (i.e. For Developmental/Learning Disability)			
	Yes		No

Background			
Have You Ever Been Convicted of a Crime?			
	Yes, Felony		Yes, Misdemeanor
	Yes, Both		No
If Yes, When Was Your Last Release (Month/Year):			
If Convicted of a Crime, What Type? (Check all that apply)			
	Burglary / Robbery / Theft		Sexual Offense
	Domestic Abuse / Violence (Any)		Weapons Related
	Drug Related		Fraud / Embezzlement
	DUI (Felony or Misdemeanor)		Child Endangerment
	Identity Theft		Arson
	Attempted Murder / Murder		Juvenile Offense (Convicted as a Juvenile)
	Other: _____		Prefer to Discuss With a Staff Member
Are You Currently on Parole or Probation?			
	Yes – Parole (State / Federal)		Yes – Probation (County / Federal)
	Yes – Both		No
Have You Ever Been a Victim of a Crime?			
	Yes – Domestic Violence		Yes – Other (Describe: _____)
	No		Prefer to Not Say
Please list any current legal problems you would like to share with us:			
Support Services			
May we help you with any of the following: (Check all that apply)			
	Counseling / Therapy		Family Violence / Domestic Abuse
	Child Care		Food
	Education		Housing
	Employment		Physical Health (Medical/Dental/Vision)
	Legal		Addiction (Substance Use, Gambling, Eating etc.)
	Other (Describe):		None at this Time
Other Programs Currently or Formerly Enrolled In:			
Alternate Contact			
Name of Person Who Knows Where to Reach You (First/Last):			
Relationship to You:		Phone:	
May We Contact This Individual If We are Unable to Reach You?			
	Yes		No
Signature			
By signing this document, I certify that the information is correct to the best of my knowledge and will be used by HIRE to provide me with services, resources, and referrals. All responses will be kept confidential to HIRE. Further, I understand that my story, pictures, or my “likeness” may be used in pictures and/or stories shared by HIRE through social media, newsletters, or other methods. Complete names and personal information always remain confidential.			
Date		Print Name (First / Last)	
Signature			