



Habitat for Humanity[®]

of Greater Jonesboro

Repair Program

Building strength, stability and self-reliance through shelter.

Basic Application Qualification Criteria

- Lived in Jonesboro, Arkansas for at least one year
- Either own a home or be current on mortgage payments
- Fall under 80% of HUD income guidelines
- Have exterior housing repair needs
- Willingness to partner and complete volunteer hours “sweat equity”
- Have the ability to pay a percentage of the repair cost

Exterior Repairs can include

- Painting
- Landscaping
- Yard clean up
- Wheelchair ramp construction

Find out if you qualify!

Application processes are only open certain times of the year. Find out if Habitat is looking for new applicants on our: Website: www.JonesboroHabitat.com/Apply
Facebook page: @JonesboroHabitat
Other: We also promote through local media





Habitat for Humanity of Greater Jonesboro
 P.O. Box 19051 | Jonesboro, AR. 72401
 (870) 203-9898 | info@JonesboroHabitat.com



A Brush with Kindness Application

Dear Applicant: Complete this application to learn if you qualify for the Habitat for Humanity repair program. Please fill out the application as completely and accurately as possible. All information you include on this application will be kept confidential with the Gramm-Leach-Bliley Act.

Applicant Information

Applicant's name _____ Age _____ Phone Number _____

Co-applicant's name _____ Age _____ Phone Number _____

Dependents and others who live with you

Name	Age	Male	Female
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Address _____ City _____ State _____ Zip _____

Number of years at address _____ Own home -OR- Paying mortgage

House Information

Number of bedrooms _____ Year built _____ House square footage _____ Age of roof _____

Type of siding Wood Vinyl Metal Brick Other _____

Requested repairs Exterior paint Landscaping Exterior clean up ADA accessible wheelchair ramp

Describe the exterior condition of your home and why you need Habitat's Brush with Kindness Repair Program?

Willingness to Partner

To be considered for Habitat's repair program, you and your family must be willing to complete a certain number of volunteer hours. Your help in repairing your home is called "sweat-equity" and may include painting, helping with construction, attending homeownership classes or other approved activities.

I am willing to complete the required sweat-equity hours: Applicant Yes No

Co-Applicant Yes No

If "no" please give a reason: _____



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Ability to pay

Habitat for Humanity is a “hand up, not a hand out” program and we require partner families to pay a percentage of the repair cost based on their affordability.

Monthly Household Income

Applicant Employer _____ Years on Job ____ Monthly (gross) wages \$ _____

Co-applicant Employer _____ Years on Job ____ Monthly (gross) wages \$ _____

Other sources of income and amounts: _____

Total monthly income for household \$ _____

Debt (To whom do you and the co-applicant owe money?)

Credit card balance \$ _____ Monthly payment \$ _____

Credit card balance \$ _____ Monthly payment \$ _____

Child support \$ _____ Alimony \$ _____ Medical \$ _____ Unpaid Medical \$ _____

Other: _____ \$ _____ Other: _____ \$ _____ Other: _____ \$ _____

Monthly Household Expenses

Home mortgage \$ _____ Utilities \$ _____ Insurance \$ _____ Child care \$ _____ Phone \$ _____

Internet \$ _____ Credit card \$ _____ TV \$ _____ Other: _____ \$ _____ Other: _____ \$ _____

Total monthly expenses for household \$ _____

Declarations

	Applicant	Co-applicant
a. Do you have outstanding judgments because of a court decision against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
b. Have you been declared bankrupt within the past seven years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
c. Have you had property foreclosed on in the past seven years?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
d. Are you currently in a lawsuit?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
e. Are you paying alimony or child support?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
f. Are you a U.S. Citizen or permanent resident?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you answered “yes” to any question a through e, or “no” to question f, please explain:		



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Authorization and Release

I understand that by filing this application, I am authorizing Habitat for Humanity to evaluate my actual need for the Habitat repair program, my ability to pay, and my willingness to be a partner through sweat-equity. I understand that the evaluation will include personal visits, a credit check and employment verification. I have answered all the questions on this application truthfully. I understand that if I have not answered the questions truthfully, my application may be denied, and that even if I have already been selected for Habitat’s program, I may be disqualified from the program. The original or a copy of this application will be retained by Habitat for Humanity even if the application is not approved.

I also understand that Habitat for Humanity screens all applicant families on the sex offender registry. By completing this application, I am submitting myself to such an inquiry. I further understand that by completing this application, I am submitting myself to a criminal background check.

Applicant signature	Date	Co-applicant signature	Date
X _____		X _____	

Please Note: If more space is needed to complete any part of this application, please use a separate sheet of paper and attach it to this application. Please mark your additional comments with “A” for applicant or “C” for co-applicant.

Submitting Application

Please return completed applications to

Habitat for Humanity of Greater Jonesboro
 520 West Monroe Ave.
 Jonesboro, AR. 72401

-OR-

Mail completed application to

Habitat for Humanity of Greater Jonesboro
 Attn: ABWK
 P.O. Box 19051
 Jonesboro, AR. 72401

Application Questions?

Call us at (870) 203-9898 -OR- Email: info@JonesboroHabitat.com

Applicant's name _____

Co-applicant's name _____

THIS PAGE IS OPTIONAL

PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW: You are not required to furnish this information, but are encouraged to do so. The law provides that we may neither discriminate on the basis of this information, nor on whether you choose to furnish it or not. However, if you choose not to furnish it, under federal regulations we are required to note ethnicity, race and sex on the basis of visual observation or surname. If you do not wish to furnish the information below, please check the box below.

Applicant	Co-applicant
<input type="checkbox"/> I do not wish to furnish this information Race (applicant may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Birthdate: ____ / ____ / ____ Marital status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)	<input type="checkbox"/> I do not wish to furnish this information Race (applicant may select more than one racial designation): <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Black/African-American <input type="checkbox"/> White <input type="checkbox"/> Asian Ethnicity: <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Non-Hispanic or Latino Sex: <input type="checkbox"/> Female <input type="checkbox"/> Male Birthdate: ____ / ____ / ____ Marital status: <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (Incl. single, divorced, widowed)

To be completed only by the person conducting the interview	
This application was taken by: <input type="checkbox"/> Face-to-face interview <input type="checkbox"/> By mail <input type="checkbox"/> By telephone	Interviewer's name (print or type)
	Interviewer's signature Date
	Interviewer's phone number

FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE

Date received: _____

Date of selection committee approval: _____

Date of notice of incomplete application letter: _____

Date of board approval: _____

Date of adverse action letter: _____

Date of partnership agreement: _____