

Completing this form does not guarantee an appointment or assistance. Please complete all information requested on this form and return it to the CAP office. Your actual service appointment will be scheduled based on openings.

Print Name: _____ Email Address: _____
 Residential Address: _____ City, State Zip Code: _____
 Mailing Address: _____ City, State Zip Code: _____
 Phone#:(____) _____ Cell#:(____) _____ Message # (____) _____

Marital Status: Never Married Married Separated Divorced Widowed

Is anyone in the household disabled? No Yes - If yes, who? _____

Date you came to Gila County (month/day/year): ____/____/____ Date you moved to Arizona (month/day/year): ____/____/____

PLEASE PRINT - List EVERYONE who lives in your residence, starting with yourself.

BE SURE TO LIST EVERYONE IN THE HOME				Sex: M or F	Relation- ship to you	Social Security Number	Age	Date of Birth	Race/ Ethnicity	Veteran: Y or N	Disabled: Y or N	Medical Insurance type: AHCCCS, Private, VA or None	Education: Diploma, GED, Degree or put the last grade completed
Last	First	Middle	Int.										
					SELF								

Sources of income (example: Social Security/SSI, Unemployment, Child Support, Alimony, Pension, V.A., Cash Assistance, Employment, etc.)

Received by (family member name)	Source = Name of Employer, Child Support, etc.	GROSS Monthly Amount
		\$
		\$
		\$
		\$
Total		\$

Are you currently working? No Yes - If yes, how many hours a week do you work? _____

Have you ever received assistance from C.A.P in Gila County? No Yes -If yes, what year were you assisted? _____

Do you receive Food Stamps? Yes No

What do you need assistance with? Rent Electric Gas Propane Other _____

Do you have a shut off notice from a utility company? No Yes - what? Electric Gas Other Disconnect Date: _____

What is your main source of heating? Electric Gas Propane Wood Pellets Wood Other _____

Do you rent your home? Yes No Type of residence: Mobile Home House Apartment Other _____

Do you live in subsidized housing? (HUD Housing, Section 8, etc.) No Yes - If yes, how long? _____

Do you have a late notice for rent? No Yes Do you have an eviction notice for rent? No Yes If yes, what date? _____

