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Name _____ Date of birth _____

Address _____
(street)

_____ (city) _____ (state) _____ (zip)

Phone number: _____ Other: _____

Social Security number: _____

E-mail: _____

Child: _____ Date of birth: _____

Child: _____ Date of birth: _____

Child: _____ Date of birth: _____

Child: _____ Date of birth: _____

Describe custody and visitation status of your children _____

Marital Status:

Single/never married

Separated

Divorced

Widowed

Racial-Ethnic Background (For statistical information only; not required; check as many as apply):

White/Caucasian

Asian

Black/African-American

American Indian/Alaska Native

Native Hawaiian/Other Pacific Islander

Hispanic/Latino

Other

Please list all persons living in your household (not listed above):

Name

Relationship

Name

Relationship

Name

Relationship

Name

Relationship

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CURRENT/PREVIOUS LANDLORD

Name: _____ Phone: _____

Address: _____

INCOME AND LIVING EXPENSES

What is your current total monthly income? \$ _____

Check the appropriate sources and give the amounts:

<input type="checkbox"/> Employment	\$ _____	<input type="checkbox"/> Vet's Benefits	\$ _____
<input type="checkbox"/> KTAP	\$ _____	<input type="checkbox"/> Alimony	\$ _____
<input type="checkbox"/> Educ.Grants/Loans	\$ _____	<input type="checkbox"/> Child Support	\$ _____
<input type="checkbox"/> Unemployment Ins.	\$ _____	<input type="checkbox"/> Other Sources	\$ _____

CURRENT EXPENSES

Rent _____
 Utilities _____
 Food _____
 Childcare _____
 Clothing _____
 Transportation _____
 Insurance _____
 Household _____
 Personal _____
 Other (list) _____

LONG-TERM EXPENSES/DEBT

Loans _____
 Charge Cards _____
 Medical _____
 Car Payment _____
 Student Loans _____
 Other (List) _____

BALANCE DUE

\$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____
 \$ _____

Will you have a car while at Scholar House? Yes No

EDUCATIONAL HISTORY

	School	Dates attended	Grade(s)/Hours	Graduate?
High School	_____	_____	_____	_____
GED Program	_____	_____	_____	_____
Tech. School	_____	_____	_____	_____
College	_____	_____	_____	_____

What educational program are you interested in entering at this time? _____

Have you been accepted into an educational program? If so, where and what is your major/program?

EASTERN SCHOLAR HOUSE PROGRAM INTEREST QUESTIONNAIRE

Return completed Eastern Scholar House Program Interest Questionnaire along with Acceptance Letter or Certificate of Good Standing from the partnering post-secondary institution.

INTERVIEWS WILL NOT BE SCHEDULED UNTIL THE ACCEPTANCE LETTER
OR CERTIFICATE OF GOOD STANDING FROM THE PARTNERING
POST-SECONDARY INSTITUTION HAS BEEN RECEIVED.

Return to Melissa Gross, Eastern Scholar House Program Director

BY MAIL

309 Spangler Drive, Richmond, KY 40475

BY EMAIL

mgross@foothillscap.org

IN PERSON

309 Spangler Drive, Richmond, KY 40475

Monday – Friday, 8:30 am – 4:30 pm

Closed noon – 1 pm / Closed Major Holidays