

Homeowners are selected based on these criteria:



PLUS: Lived or worked in Douglas County for at least the previous 12 months

need for housing

- Does your current home have safety or affordability issues?
- Do you have fewer bedrooms than necessary for the size of your family?

ability to pay an affordable mortgage

- Are you free of any collections, delinquencies, or bankruptcies?
- Are you unable to get a traditional loan to purchase a home?
- Does your income fall within 30-80% of the Douglas County Median Income?

willingness to partner with Habitat

- Are you willing to contribute 200 hours of sweat equity?
- Are you willing to participate in education and training programs?
- Are you willing to accept the responsibility of owning a home?



plus: lived or worked in Douglas County at least one year

about our homes

A typical new house has 1,200 square feet of finished living space. Most homes have three bedrooms and one bathroom. Habitat uses green building practices to make the homes and their utilities affordable.



what does it cost?

Habitat homes are a hand up. Homeowners make regular monthly mortgage payments.

applications

Call our office at 320-762-4255 to request an application or visit our website at hfhdouglascounty.org

Proudly serving Douglas County since 1997!

Please submit the following documentation with your application for the Applicant and Co-Applicant:

- Completed application and any notes of explanation you wish to include
- Completed authorization and release forms (Sections 11 and 12)
- Driver's license to be presented to Habitat staff (we will copy)
- Tax returns AND W2s from previous two years
- Paystubs from past two months
- Two months most recent bank statements for checking and savings accounts
- Two months most recent utility bills for two utilities (ex: electric, phone, water, etc)
- Two months most recent rent receipts (if applicable)
- Childcare payments for the past two months (if applicable)
- Divorce decree or legal separation agreement (if applicable)
- Student loan deferment papers stating the date until the loan payments are deferred.
(if applicable)

Need help or have questions?

Please complete this application to the best of your ability. Use additional paper if needed. If information is missing, you will be contacted to provide the needed information.

Contact Denise Schapekahn, Habitat's Homeowner Services Coordinator at 320-762-4255

Application

Habitat Homeownership Program



We are pledged to the letter and spirit of U.S. policy for the achievement of equal housing opportunity throughout the nation. We encourage and support an affirmative advertising and marketing program in which there are no barriers to obtaining housing because of race, color, religion, sex, handicap, familial status or national origin.

Dear Applicant: Please complete this application for the Habitat for Humanity homeownership program truthfully, completely, and accurately. All information you include on this application will be maintained in accordance with our privacy policy.

- Type of credit**
- I am applying for **individual credit**.
 - I am applying for **joint credit**. Total number of borrowers is _____.
 - Each borrower intends to apply for joint credit. **Your initials:** _____.

1A. APPLICANT INFORMATION

| Applicant | | | | Co-applicant | | | |
|---|-----|-----------|-----|---|-----|-----------|-----|
| Applicant's name | | | | Co-applicant's name | | | |
| Alternative and former names: | | | | Alternative and former names: | | | |
| Social Security number | | | | Social Security number | | | |
| Home phone | | | | Home phone | | | |
| Cell phone | | | | Cell phone | | | |
| Work phone | | | | Work phone | | | |
| Email | | | | Email | | | |
| Birthdate (mm/dd/yyyy) | | Age | | Birthdate (mm/dd/yyyy) | | Age | |
| <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (includes: single, divorced, widowed, civil union, domestic partnership, registered reciprocal beneficiary relationship) (Fill out Section 14.) | | | | <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Unmarried (includes: single, divorced, widowed, civil union, domestic partnership, registered reciprocal beneficiary relationship) (Fill out Section 14.) | | | |
| Dependents and others who will live with you (not listed by co-applicant) | | | | Dependents and others who will live with you (not listed by applicant) | | | |
| Name | Age | Birthdate | M/F | Name | Age | Birthdate | M/F |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| Present address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent | | | | Present address (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent | | | |
| Number of years: | | | | Number of years: | | | |
| If you have lived at your present address for less than two years, complete the following, for all addresses during the past two years: | | | | | | | |
| Last addresses (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent | | | | Last addresses (street, city, state, ZIP) <input type="checkbox"/> Own <input type="checkbox"/> Rent | | | |
| Number of years: | | | | Number of years: | | | |

DATE APPLICATION RECEIVED:



1B. MILITARY SERVICE

Did you (or your deceased spouse) serve, or are you currently serving, in the United States Armed Forces? Yes No
 (Army, Marine Corps, Navy, Air Force, Space Force, Coast Guard, Reserve or National Guard)

If yes, check all that apply:

- Currently serving on active duty with projected expiration date of service/tour ____/____/____ (mm/dd/yyyy)
- Currently retired, discharged, or separated from service
- Only period of service was as a non-activated member of the Reserve or National Guard
- Surviving spouse

Is anyone else in your household serving, or did they serve, in the United States Armed Forces? Yes No

If yes, check all that apply:

- Currently serving on active duty with projected expiration date of service/tour ____/____/____ (mm/dd/yyyy)
- Currently retired, discharged, or separated from service
- Only period of service was as a non-activated member of the Reserve or National Guard

2. WILLINGNESS TO PARTNER

To be considered for the Habitat homeownership program, you and your **household members must be willing to complete a certain number of "sweat-equity" hours, which may include hours spent** helping build your home and the homes of others, attending homeownership classes, and/or other approved activities.

I AM WILLING TO COMPLETE THE REQUIRED SWEAT-EQUITY HOURS:

- | | | |
|--------------|------------------------------|-----------------------------|
| Applicant | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| Co-applicant | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

3. PRESENT HOUSING CONDITIONS

Currently, are you: Renting Rent-free Own

Number of bedrooms (please circle) 1 2 3 4 5

Other rooms in the place where you are currently living: Kitchen Bathroom Living Room Dining room

If you rent your residence, what is your monthly rent payment? \$ _____ /month

****Please supply a copy of your lease or a copy of a money order receipt, bank statement or canceled rent check to evidence rent payment.**

Name of current landlord:

Phone number:

Address of current landlord:

In the space below, describe the condition of the house or apartment where you live. Please be specific. Use more paper if needed.
 Why do you need a Habitat home?



4. PROPERTY INFORMATION

I do not own any real estate (move to Section 5).

If you own your own residence, what is your monthly mortgage payment (including taxes, insurance, etc)?

Monthly payment \$ _____ Unpaid balance \$ _____

Do you own land other than your residence? No Yes If yes, what is your monthly payment (including taxes, insurance, etc)?

Monthly payment \$ _____ Unpaid balance \$ _____

If you wish your property to be considered for building your Habitat home, please attach the deed, any existing appraisal and information about any liens. **Note:** A separate approval process will apply with respect to any such requests, as each parcel of land is unique and may not be suitable for building on through the Habitat program.

5. EMPLOYER INFORMATION

| Applicant | | Co-applicant | |
|---|-------------------------|--|---|
| Name and address of CURRENT employer | Start date (mm/dd/yyyy) | Name and address of CURRENT employer | Start date (mm/dd/yyyy) |
| | Annual (gross) wages | | Annual (gross) wages |
| | \$ | | \$ |
| Type of business | Business phone | Type of business | Business phone |
| If working at current job less than two years, complete the following information | | | |
| Name and address of PREVIOUS employer | Years on job | Name and address of PREVIOUS employer | Years on job |
| | Annual (gross) wages | | Annual (gross) wages |
| | \$ | | \$ |
| Type of business | Business phone | Type of business | Business phone |
| <input type="checkbox"/> Check if you are the business owner or are self-employed. <input type="checkbox"/> I have an ownership share of less than 25%. Monthly income (or loss) \$ _____ <input type="checkbox"/> I have an ownership share of 25% or more. Monthly income (or loss) \$ _____ | | | PLEASE NOTE: Self-employed applicants will be required to provide additional documents such as tax returns and financial statements. |

6. MONTHLY INCOME

| Income Source | Applicant | Co-applicant | Others in household | Total |
|----------------------|-----------|--------------|---------------------|-------|
| Salary/Wages (gross) | \$ | \$ | \$ | \$ |
| Child Support | \$ | \$ | \$ | \$ |
| Social Security | \$ | \$ | \$ | \$ |
| SSI | \$ | \$ | \$ | \$ |
| Disability | \$ | \$ | \$ | \$ |
| Alimony | \$ | \$ | \$ | \$ |



| | | | | |
|---------------------------------|----|----|----|----|
| TANF: | \$ | \$ | \$ | \$ |
| Housing voucher (ie: Section 8) | \$ | \$ | \$ | \$ |
| Unemployment benefits | \$ | \$ | \$ | \$ |
| VA compensation | \$ | \$ | \$ | \$ |
| Retirement (ie: pension) | \$ | \$ | \$ | \$ |
| Military entitlements | \$ | \$ | \$ | \$ |
| Other: | \$ | \$ | \$ | \$ |
| TOTAL | \$ | \$ | \$ | \$ |

| HOUSEHOLD MEMBERS WHOSE INCOME IS LISTED ABOVE | | | |
|--|---------------|----------------|---------------|
| Name | Income source | Monthly Income | Date of Birth |
| | | | |
| | | | |
| | | | |

7. SOURCE OF CLOSING COSTS

Where will you get the money to pay for closing costs (for example, savings or gifts from family member or others; any grants for which you have or intend to apply)? If you borrow the money, whom will you borrow it from, and how will you pay it back? [Homeowners are encouraged to save approximately \$1,500]

| |
|--|
| |
| |
| |
| |
| |
| |

| 8. ASSETS | | |
|---|-------------|-----------------|
| Name of bank, savings, credit union, etc. | City, State | Current balance |
| | | \$ |
| | | \$ |
| | | \$ |
| | | \$ |
| | | \$ |

9. LIABILITIES AND EXPENSES

To whom do you owe money?

| Account | APPLICANT | | | CO-APPLICANT | | |
|---|-----------------|----------------|--------------------|-----------------|----------------|--------------------|
| | Monthly payment | Unpaid balance | Months left to pay | Monthly payment | Unpaid balance | Months left to pay |
| Auto loan | \$ | \$ | | \$ | \$ | |
| Installment (ie: boat, personal loan) | \$ | \$ | | \$ | \$ | |
| Lease (ie: furniture, appliances - includes rent-to-own) | \$ | \$ | | \$ | \$ | |
| Child support | \$ | \$ | | \$ | \$ | |
| Student loan debt | \$ | \$ | | \$ | \$ | |
| Revolving - credit card | \$ | \$ | | \$ | \$ | |
| Revolving - credit card | \$ | \$ | | \$ | \$ | |
| Open 30 days (balance paid monthly, ie: travel card) | \$ | \$ | | \$ | \$ | |
| Medical debt | \$ | \$ | | \$ | \$ | |
| Alimony/separate maintenance | \$ | \$ | | \$ | \$ | |
| Other: | \$ | \$ | | \$ | \$ | |
| TOTAL | \$ | \$ | | \$ | \$ | |

MONTHLY EXPENSES

| | Applicant | | Co-applicant | | TOTAL |
|--|-----------|--------------|--------------|-----------|-------|
| | Applicant | Co-applicant | Co-applicant | Applicant | |
| Rent | \$ | \$ | \$ | \$ | \$ |
| Utilities (electricity, water, gas) | \$ | \$ | \$ | \$ | \$ |
| Insurance (rental, car, health, etc) | \$ | \$ | \$ | \$ | \$ |
| Child care | \$ | \$ | \$ | \$ | \$ |
| Internet service | \$ | \$ | \$ | \$ | \$ |
| Cell phone | \$ | \$ | \$ | \$ | \$ |
| Land line | \$ | \$ | \$ | \$ | \$ |
| Business expenses | \$ | \$ | \$ | \$ | \$ |
| Union dues | \$ | \$ | \$ | \$ | \$ |
| Transportation expense (gas, bus pass, vehicle upkeep, etc) | \$ | \$ | \$ | \$ | \$ |
| Food and essential supplies | \$ | \$ | \$ | \$ | \$ |
| Entertainment | \$ | \$ | \$ | \$ | \$ |
| Other: | \$ | \$ | \$ | \$ | \$ |
| TOTAL | \$ | \$ | \$ | \$ | \$ |



10. DECLARATIONS

Please check the box beside the word that best answers the following questions for you and the co-applicant.

| | Applicant | Co-applicant |
|--|--|--|
| a. Are there any 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 declared bankruptcy within the past seven years? If YES, identify the type(s) of bankruptcy: <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| c. Have you had property foreclosed upon in the past seven years? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| d. Are you party to a lawsuit in which you potentially have any personal financial liability? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| e. Have you conveyed title to any property in lieu of foreclosure or completed a pre-foreclosure sale or short sale (where the lender agreed to accept less than the outstanding mortgage balance due) within the past seven years? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| f. Are you currently delinquent or in default on any federal debt or any other loan, mortgage financial obligation or loan guarantee? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| g. Are you a co-signer or guarantor on any debt of loan that is not disclosed on this application? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| h. 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 |

NOTE: If you answered "yes" to any question a through g, or "no" to question h, please explain below. Use additional paper if needed.

11. AUTHORIZATION AND RELEASE

I understand that by filing this application, I am authorizing Habitat for Humanity to evaluate my actual need for the Habitat homeownership program, my ability to repay an affordable loan and other expenses of homeownership, and my willingness to be a partner through sweat equity and otherwise according to Habitat for Humanity policy.

I understand that the evaluation will include personal visits, a credit check and employment verification (if applicable). I have answered all the questions on this application truthfully and accurately, and if any of the information provided changes after I submit this application, I will supplement this application, as applicable. I understand that if I have not answered the questions truthfully, accurately or completely, or fail to supplement this application as necessary to maintain its accuracy and completeness, my application may be denied, and that even if I have already been selected to receive a Habitat home, I may be disqualified from the program and forfeit any rights or claims to a Habitat home. The original or a copy of this application will be retained by Habitat for Humanity even if the application is not approved.

If this application is created as (or converted into) an "electronic application," I consent to the use of "electronic records" and "electronic signatures" as the terms are defined in and governed by applicable federal and/or state electronic transaction laws. I intent to sign and have signed this application either using my: (a) electronic signature or (b) a written signature and agree that if a paper version of this application is converted into an electronic application, the application will be an electronic record, and the representation of my written signature on this application will be my binding electronic signature.

I also understand that Habitat for Humanity screens all applicants 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.

x _____
Applicant signature Date

x _____
Co-applicant signature Date

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.



12. RIGHT TO RECEIVE COPY OF APPRAISAL

This is to notify you that if you qualify for the homeownership program and complete the program requirements, we may order an appraisal to determine the value of a home that you may be eligible to purchase, and we may charge you for this appraisal. Upon completion of the appraisal, we will promptly provide a copy to you, even if the loan does not close.

x
Applicant signature _____ Date _____

x
Co-applicant signature _____ Date _____

13. HOW DID YOU FIND OUT ABOUT HABITAT?

Please help us reach more potential applicants by sharing how you learned about Habitat for Humanity. Thank you!

14. UNMARRIED ADDENDUM

FOR BORROWER SELECTING THE UNMARRIED STATUS

Lender instructions for using the Unmarried Addendum: The lender may use the Unmarried Addendum only when a borrower selected "Unmarried" in Section 1 and the information collected is necessary to determine how state property laws directly or indirectly affecting creditworthiness apply, including ensuring clear title. For example, the lender may use the Unmarried Addendum when the borrower resides in a state that recognized civil unions, domestic partnership or registered reciprocal beneficiary relationships or when the property is located in such a state. "State" means any state, the District of Columbia, the Commonwealth of Puerto Rico, or any territory or possession of the United States.

If you selected "Unmarried" in Section 1:

Is there a person who is not your legal spouse but who currently has real property rights similar to those of a legal spouse? Yes No

If YES, indicate the type of relationship and the state in which the relationship was formed. For example, indicate if you are in a civil union, domestic partnership, registered reciprocal beneficiary relationship, or other relationship recognized by the state in which you currently reside or where the property is located.

- Civil union Domestic partnership Registered reciprocal beneficiary relationship
- Other (explain): _____

State: _____



(page left intentionally blank)



Equal Credit Opportunity Notice

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal Agency that monitors compliance with law concerning this company is the federal Trade Commission, with offices at FTC Regional Office for the Midwest Region, 55 West Monroe Street, Suite 1825, Chicago, IL 60603 or Federal Trade Commission, Equal Credit Opportunity, Washington, DC 20580.

You need not disclose income from alimony, child support or separate maintenance payment if you choose not to do so. However, **because we operate a Special Purpose Credit Program, we may request and require, in order to determine an applicant's eligibility** for the program and the affordable mortgage amount, information regarding the applicant's **marital status; alimony, child support and separate maintenance income; and the spouse's financial resources.**

Accordingly, if you receive income from these sources and do not provide this information with your application, your application will be considered incomplete and we will be unable to invite you to participate in the Habitat program.

Applicant(s): _____

Signature: _____

Print Name: _____

Date: _____

Signature: _____

Print Name: _____

Date: _____

Privacy Statement and Notice

At Habitat for Humanity of Douglas County, MN, we are committed to keeping your information private. We recognize the importance applicants, program families, tenants, and homeowners place on the privacy and confidentiality of their information. While new technologies allow us to more efficiently serve our customers, we are committed to maintaining privacy standards that are synonymous with our established and trusted name.

When collecting, storing, and retrieving applicant, program family, and homeowner data – such as tax returns, pay stubs, credit reports, employment verifications and payment history – internal controls are maintained throughout the process to ensure security and confidentiality.

We collect nonpublic personal information about you from the following sources:

- Information we receive from you on applications or other forms;
- Information about your transactions with us or others; and
- Information we receive from a consumer reporting agency.

We may disclose the following kinds of nonpublic personal information about you:

- Information we receive from you on applications or other forms, such as your name, address, social security number or income
- Information about your transactions with us or others such as your mortgage loan balance or payment history and
- Information we receive from a consumer reporting agency such as your credit history.

Habitat for Humanity of Douglas County, MN employees and volunteers are subject to a written policy regarding confidentiality, and access to applicant data is restricted to staff and volunteers on an as-needed basis. Information is used for lawful business purposes and is never shared with third parties without your consent, except as permitted by law. As permitted by law, we may disclose nonpublic personal information about you to the following types of third parties:

- Financial service providers, such as mortgage servicing agents;
- Nonprofit organizations, government entities, or other subsidy providers.

If you prefer that we do not disclose non-public personal information about you to nonaffiliated third parties, you may opt out of those disclosures, that is, you may direct us not to make those disclosures (other than disclosures permitted by law). If you wish to opt out of disclosures to nonaffiliated third parties, you may call Habitat for Humanity of Douglas County, MN at 320.762.4255.

15. INFORMATION FOR GOVERNMENT MONITORING PURPOSES

PLEASE READ THIS STATEMENT BEFORE COMPLETING THE BOX BELOW:

The purpose of collecting this information is to help ensure that all applicants are being treated fairly, that the housing needs of communities and neighborhoods are being fulfilled, and to otherwise evaluate our programs and report to our funders. For residential mortgage lending, Federal law requires that we ask applicants for their demographic information (ethnicity, sex, and race) in order to monitor our compliance with equal credit opportunity, fair housing and home mortgage disclosure laws. You are not required to provide this information but are encouraged to do so. You may select one or more designations for **“Ethnicity” and more or more designations for “Race.”** **The law provides that we may not discriminate** on the basis of this information or on whether you choose to provide it. However, if you choose not to provide the information and you have made this application in person, federal regulations require us to note your ethnicity, sex and race on the basis of visual observation or surname. The law also provides that we may not discriminate on the basis of age or marital status information you provide in this application. If you do not wish to provide some or all of this information, please check below.

| Applicant | Co-applicant |
|---|---|
| <p>Ethnicity (check one or more):</p> <p><input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino <i>Origin:</i> _____ <i>For example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.</i></p> <p><input type="checkbox"/> Non-Hispanic or Latino</p> <p><input type="checkbox"/> I do not wish to furnish this information</p> | <p>Ethnicity (check one or more):</p> <p><input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> Mexican <input type="checkbox"/> Puerto Rican <input type="checkbox"/> Cuban <input type="checkbox"/> Other Hispanic or Latino <i>Origin:</i> _____ <i>For example: Argentinean, Colombian, Dominican, Nicaraguan, Salvadoran, Spaniard, and so on.</i></p> <p><input type="checkbox"/> Non-Hispanic or Latino</p> <p><input type="checkbox"/> I do not wish to furnish this information</p> |
| <p>Sex:</p> <p><input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information</p> | <p>Sex:</p> <p><input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> I do not wish to provide this information</p> |
| <p>Race (check one or more):</p> <p><input type="checkbox"/> American Indian or Alaska Native <i>Name of enrolled or principal tribe:</i> _____</p> <p><input type="checkbox"/> Asian <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian – <i>race:</i> _____ <i>For example: Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.</i></p> <p><input type="checkbox"/> Black/African-American</p> <p><input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander – <i>race:</i> _____ <i>For example: Fijian, Tongan, and so on.</i></p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> I do not wish to furnish this information</p> | <p>Race (check one or more):</p> <p><input type="checkbox"/> American Indian or Alaska Native <i>Name of enrolled or principal tribe:</i> _____</p> <p><input type="checkbox"/> Asian <input type="checkbox"/> Asian Indian <input type="checkbox"/> Chinese <input type="checkbox"/> Filipino <input type="checkbox"/> Japanese <input type="checkbox"/> Korean <input type="checkbox"/> Vietnamese <input type="checkbox"/> Other Asian – <i>race:</i> _____ <i>For example: Hmong, Laotian, Thai, Pakistani, Cambodian, and so on.</i></p> <p><input type="checkbox"/> Black/African-American</p> <p><input type="checkbox"/> Native Hawaiian or other Pacific Islander <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Guamanian or Chamorro <input type="checkbox"/> Samoan <input type="checkbox"/> Other Pacific Islander – <i>race:</i> _____ <i>For example: Fijian, Tongan, and so on.</i></p> <p><input type="checkbox"/> White</p> <p><input type="checkbox"/> I do not wish to furnish this information</p> |

| To be completed only by the person conducting the interview | |
|---|--|
| Was the ethnicity of the Borrower collected on the basis of visual observation or surname? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Was the sex of the Borrower collected on the basis of visual observation or surname? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Was the race of the Borrower collected on the basis of visual observation or surname? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| This application was taken by: <input type="checkbox"/> Face-to-face interview (included electronic media w/video component) <input type="checkbox"/> Mail <input type="checkbox"/> Telephone | Interviewer's name: |
| | Interviewer's signature: |
| | Date: |
| | Interviewer's Phone #: |

