



For office use ONLY
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CAMDEN COUNTY COUNCIL ON ECONOMIC OPPORTUNITY

AGENCY LOCATION: CUI UWC

SCREENING FORM

(NOTE: This is NOT an application. This is a Pre-Screening Form.)

*****PLEASE PRINT AND COMPLETE ALL INFORMATION BELOW*****

DATE: _____

NAME:		SS# (last 4 digits)	
ADDRESS:		COUNTY:	
CITY/ ZIPCODE:		PHONE #:	
EMAIL:		Alt. Phone #:	

1. What type of assistance are you in need of? (Circle ONE)

MORTGAGE RENT (Back rent OR Relocation) UTILITY

2. Have you ever applied for *Mortgage, Rent, or Utility Assistance* in the past 12 months?

YES or NO

a.) If yes, did you receive assistance? What type and through which agency?

b.) Are you currently receiving any type of assistance through another agency?

(Explain) _____

3. What is the source(s) of income in the household? (Check all that apply)

- Wages SSI SSA SSDI Unemployment benefits
- Workman's Comp Child Support TANF/ GA (Cash benefits)
- Other: _____

Gross Monthly Household Income: \$ _____ Number of people in Household _____

4. What has caused your crisis? (Check all that apply)

- Medical Emergency Loss of Income Eviction Crime
- Domestic Violence Natural Disaster (Flood, Fire, etc.)
- Other: _____



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Answer #5 only if you are applying for Utility Assistance.

5. What is the amount that you owe? _____
 - a. Do you have any monies saved towards the amount owed? _____
 - b. If yes, How much? _____
 - c. Have you attempted a payment arrangement with your utility company? _____

Answer #6 only if you are applying for Rental Assistance.

6. How much is your monthly rent? \$ _____
 - a. What is the amount that you are requesting assistance with? \$ _____
 - b. Are you living in Subsidized or Section 8 housing? _____
 - c. Do you have a Court Summons with a Docket # on it? _____
 If yes, what is the Docket #? LT- _____
 If no, did you receive a late notice or intent to file an eviction? _____

Answer #7 only if you are applying for Mortgage Assistance.

7. How much is your monthly mortgage payment? \$ _____
 - a. What is the amount that you are requesting assistance with? _____
 - b. Have you applied for a modification or deferment with your mortgage company? _____
 - c. Is your home in process of foreclosure? _____

ALL APPLICANTS REQUESTING ASSISTANCE MUST COMPLETE THE SECTION BELOW.
Please list everyone in the household.

NAME	DOB	Relation to applicant	Gender	Income source/ Amount

******* FOR OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE*******

Assigned Case Manager: _____ Date: _____

	Comments	Date
Initial contact w/ client		
Follow-up contact with client		