



Personal Profile Intake Form Homebuyer Education

Complete this form and return to:

Cumberland Neighborhood Housing Services, Inc.
400 North Mechanic Street
Cumberland, Maryland 21502
301-722-6958

CUSTOMER INFORMATION (PLEASE PRINT CLEARLY)

First Name: _____ Middle Initial: _____

Last Name: _____

Address: _____

Apartment or suite #: _____

City: _____

State: _____ Zip Code: _____

Phone: _____ E-Mail: _____

Cell: _____ Fax: _____

Birth Date: _____ Social Security #: _____

RACE (PLEASE CHECK ONE)

- | | |
|---|---|
| <input type="checkbox"/> White | <input type="checkbox"/> Black or African American |
| <input type="checkbox"/> American Indian/Alaskan Native | <input type="checkbox"/> Asian |
| <input type="checkbox"/> Native Hawaiian/Other Pacific Islander | <input type="checkbox"/> Asian and White |
| <input type="checkbox"/> American Indian/Alaskan Native and White | <input type="checkbox"/> Black/African American and White |
| <input type="checkbox"/> American Indian/Alaskan Native and Black | <input type="checkbox"/> Other |

ETHNICITY (PLEASE SELECT "YES" OR "NO" FOR HISPANIC ORIGIN) THIS IS IN ADDITION TO THE "RACE" CATEGORY

- | | | |
|--------------|------------------------------|-----------------------------|
| Hispanic | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| Foreign Born | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

MARITAL STATUS (PLEASE CHECK ONE)

- | | | | | |
|---------------------------------|----------------------------------|-----------------------------------|------------------------------------|----------------------------------|
| <input type="checkbox"/> Single | <input type="checkbox"/> Married | <input type="checkbox"/> Divorced | <input type="checkbox"/> Separated | <input type="checkbox"/> Widowed |
|---------------------------------|----------------------------------|-----------------------------------|------------------------------------|----------------------------------|

GENDER (PLEASE CHECK ONE)

- Male Female

HANDICAPPED (PLEASE CHECK ONE)

- Yes No

CURRENT HOUSING ARRANGEMENT (PLEASE CHECK ONE)

- Rent Homeless Homeowner with mortgage
- Living with family member and not paying rent Homeowner with mortgage paid off

Are you a first time buyer (you do not currently own a home and have not owned a home in the past three years)? Yes No

Household Type (please select the most accurate)

- Female headed single parent household Male headed single parent household Single adult
- Two or more unrelated adults Married with children Married without children
- Other

Family/Household Size: _____

How many dependents (other than those listed by any co-borrower)? _____

What ages are they? _____, _____, _____, _____, _____, _____, _____, _____, _____

Are there non-dependents who will be living in the home? Yes No (If yes, list below:)

Relationship	Age	Relationship	Age

Annual Family Income: _____

EDUCATION (please check one):

- Below High School Diploma High School Diploma or Equivalent Two-Year College
- Bachelors Degree Masters Degree Above Masters Degree

REFERRED TO BY (PLEASE CHECK ALL THAT APPLY):

- Print Advertisement Bank Government TV Realtor
- Staff/Board member Walk-In Friend Radio Newspaper Article

If you were referred by a bank, which one? _____

CNHS COUNSELING PLAN

Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____

Phone: _____ Date: _____

Where did you hear about CNHS' Homebuyers Education Classes?

DO YOU THINK YOU ARE READY TO PURCHASE A HOME? (PLEASE CHECK ONE)

- Yes No

IF NO WHAT IS THE REASON FOR ATTENDING THESE CLASSES? (PLEASE CHECK ONE)

- General Information
- Credit
- Budget
- Too much debt
- Other

What goals do you plan to achieve from these classes?

PRINT NAME

PRINT NAME

Signature/Date

Signature/Date

CNHS DISCLOSURE

The following disclosure and acknowledgment informs you, the customer, that you can choose one or more of Cumberland Neighborhood Housing Service’s (CNHS) services independent of each other.

As a counselor, CNHS counsels you in preparation of home ownership. In this capacity, CNHS’ primary responsibility is to you. You are not obligated to obtain financing or purchase residential real property owned by CNHS as a condition of receiving counseling services from CNHS.

No service of CNHS is dependent or contingent on utilizing other services. You are entitled and encouraged to seek financing from the lender of your choice, and to purchase the home of your choice.

You may retain the services of a real estate agent/broker or a counselor who will represent only your interest in the transaction.

Since CNHS is not a legal expert or an attorney, you may wish to consult an attorney before signing this form.

CONSENT

By signing below, you acknowledge that you have received and read this disclosure notice.

PRINT NAME

PRINT NAME

Signature/Date

Signature/Date