

Approved Denied Date _____

(for office use only)

Joi's Angels

A Not-for-profit Organization

Furniture/Household Items/Clothing Assistance Program Application

EAST ORANGE RESIDENTS ONLY

DATE _____

CLIENT NAME

DATE OF BIRTH

(First)

(Last)

ADDRESS

(Street)

(City)

(State)

(Zip Code)

PHONE

(Mobile)

(Home)

(Work)

EMAIL ADDRESS

SOCIAL MEDIA

(Facebook)

(Twitter)

(SnapChat)

(Instagram)

ETHNICITY

African American

Asian

Caucasian

Latin American/Hispanic

Indian

Native American

Other

GENDER

Male

Female

Transgender

MARITAL STATUS

Single

Married

Widowed

Divorced

Separated

HOUSING STATUS

Rent

Own

Shelter

Living with family/friends

Other

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GROSS MONTHLY HOUSEHOLD INCOME

(Adults & Children) \$ _____

PLEASE CHECK ALL SOURCES OF INCOME

Employment Wages Self-Employment Wages

TANF FSP SSI

SSDI Social Security WIC

Medicaid Child Support Alimony

Disaster Relief Foster Care Other

NUMBER OF CHILDREN IN HOUSEHOLD

(Under the age of 18) _____

NUMBER OF CHILDREN IN HOUSEHOLD

(Age 18-24 attending school) _____

TOTAL NUMBER OF HOUSEHOLD MEMBERS

(All adults and children) _____

NAMES AND AGES OF CHILDREN

(Name) (Age)

(Name) (Age)

(Name) (Age)

(Name) (Age)

HIGHEST LEVEL OF EDUCATION

(Check One)

Grammar School High School Some College Associate's Degree

Bachelor's Degree Graduate Degree or Above

APPLICANT

Print Name: _____ Signature: _____ Date: _____

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HUD 2019 INCOME ELIGIBILITY GUIDELINES

# IN HOUSEHOLD	VERY LOW	EXTREMELY LOW
1	\$35,200	\$21,100
2	\$40,200	\$24,100
3	\$45,250	\$27,150
4	\$50,250	\$30,150
5	\$54,250	\$34,550
6	\$58,300	\$34,950
7	\$62,300	\$37,400
8	\$66,350	\$39,800

NOTE: East Orange is part of the Newark, NJ HUD Metro FMR Area, so all information presented here applies to all of the Newark, NJ HUD guidelines

For Office Use Only

PROOF OF ELIGIBILITY
(Copied and Attached)

DELIVERY DATE: _____

Process Start Date

Process End Date

NJ Photo Identification

Proof of East Orange Address

Paystub

Benefit Award Letter

TANF ID

Snap Card

Medicaid Card

Social Security Card

Other

Application: Accepted Declined Wait Status _____

Notes (Missing Items List): _____

Staff Name: _____ Signature: _____