

Asheville Homeless Network
Adopt-A-Homeless-Person Program
Application Form

Name: _____ Date of Birth: _____

What is the best way to contact you (address, phone, A-HOPE, friend, etc.)? _____

My current goals are: _____

My long-term goals are: _____

My greatest current needs are: _____

My hopes and dreams are: _____

Highest Education: Grade Completed: _____ ? GED ? H.SDiploma
? Some College ? AA/AS ? BA/BS ? MA/MS ? Doctorate

Are you disabled? Y N Receiving SSI/SSDI? Y N

Are you employed? Y N Where? _____

Job Skills: _____

Jobs held in the past: _____

Do you have a current driver's license? Y N What state? _____

Do you have a State ID card? Y N What state? _____

What do you like to do? What is fun for you? What are your hobbies and interests? What brings you joy or sorrow? _____

Current Residence ? Apt/House ? Car? Tent? Shelter ? Other: _____

How long have you been homeless? _____

Why did you become homeless? _____

Religious affiliation (optional) _____

Sexual orientation (optional) _____

Marital Status (optional): ? Single ? Divorced ? Separated ? Partnered ? Married ? Widow/er

Who should we notify in an emergency? _____

What questions or concerns do you have about the program? _____

