**COMMUNITY TEAMWORK, INC.**

**155 Merrimack Street, 3rd Floor**

**Lowell, MA 01852**

**SECTION 8 HOUSING VOUCHER CHOICE - MAINSTREAM PROGRAM**

**WAITING LIST APPLICATION – MA882**

**COMMUNITY TEAMWORK, INC.**

**SECTION 8 HOUSING VOUCHER CHOICE - MAINSTREAM PROGRAMN**

**APPLICATION MA882**

DATE RECEIVED:

TIME RECEIVED:

CTI MA882 Mainstream Program – MA882

Last Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Zip Code\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Number/s:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth of Head of Household

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_\_

Head of Household Social Security Number

\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_\_\_

Does the Head of Household have a disability?

* Yes
* No

If yes, is this person currently between the ages of 18 and 61?

* Yes
* No

Is there another household member who has a disability?

* Yes
* No

If yes, what is their date of birth? \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_\_

Does your household meet any of the following categories? Please check ONLY one. Definitions are included on this application below.

* Homeless
* Institutionalized

If you checked one of the boxes, please explain in a few sentences:

**Definitions:**

Homeless means:

An applicant will generally be considered homeless, if the applicant lacks a fixed regular and adequate nighttime residence and has a nighttime residence that is (a) a supervised publically or privately operated shelter designated to provide temporary living accommodations ( including welfare hotels, congregate shelters, and transitional housing), or (b) an institution in which they have been residents for more than 30 consecutive days and no subsequent residences have been identified and they lack the resources and support networks needed to obtain access to housing, or (c) a public or private place not designated for, or ordinary used as a regular sleeping place for human beings.

Institutionalized means:

An individual currently living in an institution or other segregated setting, which includes, but is not limited to:

1. Congregate settings populated exclusively or primarily with individuals with disabilities;
2. Congregate settings characterized by regimentation in daily activities, lack of privacy or autonomy, policies limiting visitors, or limits on individuals’ ability to engage freely in community activities and to manage their own activities of daily living; or
3. Settings that provide for daytime activities primarily with other individuals with disabilities.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Signature Date

