



BLACK HILLS COMMUNITY LOAN FUND

1764 Centre Street, Suite 1 Rapid City, SD 57703 Phone: (605) 519-5124 Website: www.bhclf.org

CLIENT INTAKE FORM

Black Hills Community Loan Fund would like to learn how we and others we partner with can best suit your needs. To assist us in this process, please complete our customer information form.

The information you provide will remain confidential. We will not release your individual information to any other party, individual, or government agency without your prior written consent and approval.

A summary of the collective data about our clients will be used to report to our funding sources and the public about the impact of our services on the people and communities we serve. Information will also be used to help our staff provide better services and to track and evaluate the impact of these services.

GENERAL INFORMATION

Date you completed this form: _____ Social Sec. No.: _____

Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email: _____

Are you a veteran? Yes No Branch: _____

Tribal Membership (if applicable): Enrollment No.: _____

Tribe: _____

Have you ever received services from Black Hills Community Loan Fund in the past? Yes No

If yes, What year(s) did you receive services? _____

What is the highest level of education you've completed? Select one:

Primary School Some High School, Not Completed High School Diploma or GED

Some College, Not Completed Graduated College (4 Year) Attended Graduate School

EMERGENCY CONTACT INFORMATION

Who is a relative or friend who would know how to contact you, even if you move?

Name: _____ **Relationship to you:** _____

Home Phone: _____ **Cell Phone:** _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

HOUSEHOLD INFORMATION

“Household” includes: your financial dependents — for example, your dependent children, anyone you depend on financially — for example, your parents, or anyone you are financially interdependent with — for example, your spouse or partner. Your “household” may or may not be the same as the people you live with.

How many adults (18 years and older) currently live in your household? _____

How many children (under 18 years) currently live in your household? _____

What is your marital status? Select one:

Single **Married** **Divorced** **Legally Separated**

INCOME INFORMATION

Do you have a checking account? **Yes** **No** **Do you have a savings account?** **Yes** **No**

What is your typical gross (before taxes) monthly household income?
Include all household members. \$ _____

What is your gross (before taxes) annual household income?
Include all household members. \$ _____

Which of the following sources provide income for members of your household?

- | | |
|---|---|
| <input type="checkbox"/> Employed by Private Corporation | <input type="checkbox"/> Child Support and/or Alimony |
| <input type="checkbox"/> Employed by Government Agency | <input type="checkbox"/> Pensions and/or Retirement |
| <input type="checkbox"/> Self-Employed | <input type="checkbox"/> Government Assistance (TANF, Food Stamps, SSI, Social Security, Voc. Rehab, Unemployment, Veterans’ Benefits) |
| <input type="checkbox"/> Other (please specify): | |

EMPLOYMENT INFORMATION

What is your personal primary employment status (choose one)?

- Employed full-time (for yourself or others) Employed part-time (for yourself or others)
- Employed more than full-time (overtime or more than one job, for yourself or others)
- Unemployed, currently seeking employment Working and attending school or job training
- Homemaker, not seeking employment Laid off, waiting to be called back
- Disabled, not seeking employment Retired, not seeking employment

Current Employer: _____

Your Job Title: _____

How long have you worked for this employer? _____

Employer Address: _____

City: _____ State: _____ Zip Code: _____

NEED FOR LOAN PRODUCTS AND FINANCIAL LITERACY SERVICES

Are you interested in improving your money management skills? Yes No

If yes, what types of areas would you like assistance with? Select all that apply.

- Budgeting Getting Credit Credit Counseling Reducing Debt
- Banking Improving Saving Money Understanding Your Credit Report
- Other (please describe): _____

Do you own your own home? Yes No If yes, for how long: _____

Do you rent? Yes No Length of time at current residence: _____

If yes, list your landlord's name: _____ Phone Number: _____

Previous Landlord's Name: _____ Phone Number: _____

Length of time at previous residence: _____

Are you interested in owning your own home? Yes No

Have you been turned down for a Home Loan before? Yes No

WHICH OF THESE AREAS WOULD YOU LIKE ASSISTANCE WITH? SELECT ALL THAT APPLY.

- Financial Literacy** (Saving money and understanding your credit) **Individual Credit Coaching** **Homebuyer Education**
 Tax Assistance **A Credit Builder Loan** **Home Loan Products**
 Other (please describe): _____

GENDER, ETHNICITY, AND RACE INFORMATION

The following information is requested by the federal government in order to monitor compliance with federal laws prohibiting discrimination against applicants or recipients on the basis of ethnicity, race and gender. You are not required to furnish this information but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish the information, Black Hills Community Loan Fund is required to note the ethnicity, race, and gender of individual applications based on visual observation or surname.

I do not wish to furnish gender, ethnicity, and race information. **Your initials:** _____

I will furnish the information: (Please complete section below)

Gender: **Female** **Male** **Ethnicity:** **Hispanic** **Non-Hispanic**
Race: **Native American** **Caucasian** **African American**
 Pacific Islander **Asian** **Other** (please specify): _____

ADDITIONAL INFORMATION REQUIRED FOR LOAN APPLICANTS

A credit report and additional documents are required from all loan applicants. If you anticipate that one of the services you may request is a loan, be prepared to provide the Black Hills Community Loan Fund with the documents identified below. Not all documents may apply to your situation.

- | | |
|----------------------------------|--|
| ✓ Business Plan | ✓ Federal Tax Return (most recent calendar year) |
| ✓ Reference Letter | ✓ Financial Literacy Training Completion Certificate |
| ✓ Copy of Driver's License or ID | ✓ Copy of Tribal Enrollment Card |
| ✓ Personal Budget | ✓ Indianpreneurship Course Completion Certificate |

CLIENT CERTIFICATION AND APPROVAL FOR CREDIT REPORT

The information provided in this form is accurate and complete to the best of my knowledge.

By typing your full legal name in the following format, /s/ **First name Last name**, you consent to using an electronic signature for submission of this document. Your identification and written signature will be obtained at the time of your application appointment.

Signature: _____ **Date:** _____

FOR OFFICE USE ONLY			
Date Client Intake Form Received: ____/____/____	Intake Form Reviewed By: _____		
Client Start Date: ____/____/____	Date Paper File Established: ____/____/____	Date Data Entered into TEA: ____/____/____	
Date Application Provided: ____/____/____	Circle One: Electronic or Physical		