



CATHOLIC CHARITIES

Diocese of Wilmington

Please make sure you fill out all of the forms completely and send in all required documentation.

Submitting applications that are missing information or are not filled out completely will cause a significant delay in processing.

If you have any questions about this packet please call your nearest location or send an email to [Basicneeds@ccwilm.org](mailto:Basicneeds@ccwilm.org) [Setoncenter@ccwilm.org](mailto:Setoncenter@ccwilm.org) (Eastern Shore, MD Applicants)

New Castle County – (302) 655-9624

Kent County – (302) 674-1600

Sussex County – (302) 856-9578

MD Lower Eastern Shore – (410) 651-9608



## Catholic Charities Basic Needs Intake Form

First Name:		MI:	Last Name:		Date:
Street Address:		Apt #	City:	State:	Zip:
Phone #:	Email:		Total Household Members:		Total bedrooms in Home:

**PLEASE COMPLETE BELOW SECTION FOR ALL HOUSEHOLD MEMBERS**

Household Member Name	Relationship	Date of Birth	Social Security Number	M/F	Race*	Hispanic Y/N	Veteran Y/N	Disability Y/N	Citizen Y/N
	SELF								

\*Race [For each household member]: White, Black/African American, Asian, American Indian/Alaskan, Native Hawaiian/Other Pacific Islander, American Indian/Alaskan Native & White, American Indian/Alaskan Native & Black/African American, Multi-Racial

Income Source**	Household Member	Amount	Frequency/How Often?

\*\* Income Source [For each household member]: Employment, Unemployment Compensation, TANF, Pension, SSA, SSDI, Family Support, Veteran's Admin, No Income, Other



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**1. I am currently:**

- Homeowner
- Renter
- Homeless (staying in shelter, hotel, living with others)

Landlord Contact #: \_\_\_\_\_ Landlord Email: \_\_\_\_\_

**2. Are you currently living in public housing, receive Section 8, or any other rental assistance?**

- Yes (Please provide most recent income certification)
- No

**3. Type of Assistance Needed:**

- Rent (Past Due/Late Rent/5Day or Eviction Notice required)
- Mortgage (Current Statement required)
- Utility (Current Bill/Shut off Notice required)
- Security Deposit (Approval/Welcome/ Move-in letter for new residence required)
- Case Management
- Other: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Briefly describe what other resources have been used)

**4. Have you applied to/or currently receiving assistance with this need from any other organization/agency/program?**

\_\_\_\_\_

\_\_\_\_\_

(Briefly describe what other resources have been used)

**Please Note: Your application will be reviewed prior to program appointment. Meeting the minimum requirements and completing this application does not guarantee assistance.**



**Required Documents for Application Submission**

- Photo Identification for all household members ages 18 and older**
  
- Social Security Cards for all household members**
  
- Proof of Income for the last 60 days (all that apply):**
  - Fixed Income:
    - Social Security Award Letter from current year
    - Veterans Assistance Award Letter
    - Proof of Pension
  - Employment Income:
    - Paystubs for the last 60 days
    - Tax Records for self-employed(Form 1040, 1099)
  - Other Sources
    - Unemployment Compensation Determination w/ complete payment history
    - Child Support (12 month printout needed)
  
- Proof of Social Service Benefits (all that apply):**
  - TANF
  - General Assistance
  - Food Stamp/SNAP Benefit Award Letter
  
- Current Utility Bill (any of the following):**
  - Gas
  - Electric
  - Water Bill
  
- Proof of Residency (all that apply):**
  - Full Lease agreement w/ Signature pages
    - Welcome/Approval letter (Security Deposit requests)
    - Past Due/Late Rent/5Day or Eviction Notice required (Rental Assistance requests)
  - Current Mortgage Statement or Deed