



# SOMERVILLE HOUSING AUTHORITY

30 Memorial Road, Somerville, Massachusetts 02145  
Telephone (617) 625-1152 Fax (617) 628-7057 TDD (617) 628-8889

## *First Time Homebuyer Education Program* **REGISTRATION FORM**

Certified by the Massachusetts Homeownership Collaborative

Applicant	Co-applicant
Name:	Name:
Address:	Address:
City/State/Zip:	City/State/Zip:
Phone [daytime]:	Phone [daytime]:
Phone [evening]:	Phone [evening]:
Email:	Email:
<b>FOR OFFICE USE ONLY</b>	
<b>CHECK #</b>	<b>AMOUNT \$</b>
<p>How did you learn about this class?</p> <p> <input type="checkbox"/> Agency / Organization  <input type="checkbox"/> Mailer / Flyer / Brochure  <input type="checkbox"/> Friend / Relative  <input type="checkbox"/> Lender / Mortgage company  <input type="checkbox"/> Newspaper  <input type="checkbox"/> Internet  <input type="checkbox"/> Someone who took a workshop  <input type="checkbox"/> Other: _____ </p>	
Signature:	Signature:
Date:	Date:



**Please make checks payable to:  
Somerville Housing Authority  
30 Memorial Rd.  
Somerville, MA 02145**

**Total cost for all three classes is \$25.00 (applicant), \$10.00 (co-applicant)**

Applicant	Co-applicant
1) Age: <input type="checkbox"/> 20-30 years <input type="checkbox"/> 31-40 years <input type="checkbox"/> 41-50 years <input type="checkbox"/> 51-60 years <input type="checkbox"/> 60+ years	1) Age: <input type="checkbox"/> 20-30 years <input type="checkbox"/> 31-40 years <input type="checkbox"/> 41-50 years <input type="checkbox"/> 51-60 years <input type="checkbox"/> 60+ years
2) Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female 3) Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No 4) Disabled? <input type="checkbox"/> Yes <input type="checkbox"/> No 5) Are you the Head of Household? <input type="checkbox"/> Yes <input type="checkbox"/> No	2) Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female 3) Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No 4) Disabled? <input type="checkbox"/> Yes <input type="checkbox"/> No 5) Are you the Head of Household? <input type="checkbox"/> Yes <input type="checkbox"/> No
6) Ethnicity: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non Hispanic/Latino  <i>* For Census 2000, there are two categories for ethnicity: Hispanic or Latino and Not Hispanic or Latino. The federal government considers race and Hispanic origin to be two separate and distinct concepts. Hispanics and Latinos may be of any race. (Source: <a href="http://factfinder.census.gov/">http://factfinder.census.gov/</a>)</i>	6) Ethnicity: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non Hispanic/Latino  <i>* For Census 2000, there are two categories for ethnicity: Hispanic or Latino and Not Hispanic or Latino. The federal government considers race and Hispanic origin to be two separate and distinct concepts. Hispanics and Latinos may be of any race. (Source: <a href="http://factfinder.census.gov/">http://factfinder.census.gov/</a>)</i>
7) Race: <i>(Please select one)</i>  <u>Single race categories</u> <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White  <u>Multi-race categories</u> <input type="checkbox"/> American Indian or Alaskan Native <b>and</b> White <input type="checkbox"/> Asian <b>and</b> White <input type="checkbox"/> Black or African American <b>and</b> White <input type="checkbox"/> American Indian or Alaskan Native <b>and</b> Black or African American <input type="checkbox"/> Other multiple race	7) Race: <i>(Please select one)</i>  <u>Single race categories</u> <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American <input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White  <u>Multi-race categories</u> <input type="checkbox"/> American Indian or Alaskan Native <b>and</b> White <input type="checkbox"/> Asian <b>and</b> White <input type="checkbox"/> Black or African American <b>and</b> White <input type="checkbox"/> American Indian or Alaskan Native <b>and</b> Black or African American <input type="checkbox"/> Other multiple race
8) Have your parents or grandparents ever owned a home in the U.S.?  <input type="checkbox"/> Yes <input type="checkbox"/> No	8) Have your parents or grandparents ever owned a home in the U.S.?  <input type="checkbox"/> Yes <input type="checkbox"/> No
9) Where were you born?  <input type="checkbox"/> U.S. <input type="checkbox"/> U.S. Territory (e.g., Puerto Rico) <input type="checkbox"/> Other country: _____	9) Where were you born?  <input type="checkbox"/> U.S. <input type="checkbox"/> U.S. Territory (e.g., Puerto Rico) <input type="checkbox"/> Other country: _____
10) Highest level of education completed:  <input type="checkbox"/> Less than high school graduate <input type="checkbox"/> High School diploma/GED	10) Highest level of education completed:  <input type="checkbox"/> Less than high school graduate <input type="checkbox"/> High School diploma/GED <input type="checkbox"/> 2-year college

<input type="checkbox"/> 2-year college <input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Graduate school/post-secondary degree	<input type="checkbox"/> Bachelor's degree <input type="checkbox"/> Graduate school/post-secondary degree
11) Have you seen a copy of your credit report in the last year? <input type="checkbox"/> Yes <input type="checkbox"/> No  12) Do you know your credit score? <input type="checkbox"/> Yes <input type="checkbox"/> No	11) Have you seen a copy of your credit report in the last year? <input type="checkbox"/> Yes <input type="checkbox"/> No  12) Do you know your credit score? <input type="checkbox"/> Yes <input type="checkbox"/> No

**Household Information**

13) Household size:

(a) Number of adults: \_\_\_\_\_

(b) Number of children: \_\_\_\_\_

14) Annual household income:

\$20,000 and below  
 \$20,000 to \$30,000  
 \$30,000 to \$40,000  
 \$40,000 to \$50,000  
 \$50,000 to \$60,000  
 \$60,000 to \$70,000  
 \$70,000 to \$80,000  
 \$80,000 to \$90,000  
 \$90,000 to \$100,000  
 \$100,000+

15) Where are you in the home buying process? *(please select all that apply)*

<input type="checkbox"/> No idea where to begin	<input type="checkbox"/> Made an offer on a property
<input type="checkbox"/> Plan to purchase a house within 2 years	<input type="checkbox"/> Had the offer accepted
<input type="checkbox"/> Plan to purchase a house in 3-5 years	<input type="checkbox"/> Have signed a P&S Agreement
<input type="checkbox"/> Actively looking to buy a house now	<input type="checkbox"/> Have a closing date scheduled
<input type="checkbox"/> Already working with a lender	
<input type="checkbox"/> Already working with a realtor	

16) What type of property are you planning to purchase?

<input type="checkbox"/> Condominium	<input type="checkbox"/> 2-family home
<input type="checkbox"/> Single family home	<input type="checkbox"/> 3-4 family home

Other: \_\_\_\_\_

**\*\*\*THANK YOU FOR COMPLETING THIS FORM\*\*\***

The Somerville Housing Authority will use this information to evaluate the First Time Homebuyer Education workshops and learn more about the characteristics of who the program is serving. The information collected from this form is completely anonymous.