

Tools of the Trade Application

This application is usually completed by the applicant. However, if you need assistance completing it, please contact Outreach@nmeaf.org to request assistance.

DATE:	
NAME:	
ADDRESS:	
PHONE:	
DATE OF BIRTH:	NUMBER OF PEOPLE IN HOUSEHOLD:
GENDER: ☐ Male ☐ Female ☐ Prefer not to answer	
CURRENT LIVING STATUS: ☐ Living with family ☐ Living in a halfway house ☐ Living alone ☐ Living in work-release program ☐ Living with friends ☐ Other (please specify) _____ ☐ Living in homeless shelter _____	
MARRIED? ☐ Yes ☐ No	CHILDREN? ☐ Yes ☐ No
ARE YOU: ☐ African-American ☐ Native American ☐ Hispanic ☐ Prefer not to answer ☐ White-American ☐ Other ☐ Asian-American	
PLEASE CHECK WHICH OF THE FOLLOWING IS CLOSEST TO YOUR HOUSEHOLD'S YEARLY INCOME:	☐ \$0-\$5,000 ☐ \$25,001-\$30,000 ☐ \$5,001-\$10,000 ☐ \$30,001-\$35,000 ☐ \$10,001-\$15,000 ☐ \$35,001-\$40,000 ☐ \$15,001-\$20,000 ☐ \$40,00-\$50,000 ☐ \$20,001-\$25,000 ☐ Over \$50,001
IS ENGLISH THE MAIN SPOKEN LANGUAGE IN YOUR HOUSEHOLD? ☐ Yes ☐ No	
LIST ANY OTHER LANGUAGES SPOKEN IN YOUR HOUSEHOLD: _____	

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[illegible]