

PROGRAM APPLICATION- HousingSmarts



Neighborhood Housing and Community Development (NHCD)
Austin Housing Finance Corporation (AHFC)
MAILING ADDRESS: P. O. Box 1088 • Austin, Texas 78767
DELIVERY ADDRESS: 1000 E. 11th Street, Suite 200
Phone: (512) 974-3100 • Fax (512) 974-3161
Email: nhdcs@austintexas.gov
Website: www.austintexas.gov/department/housing



Thank you for your interest in the City of Austin NHCD HousingSmarts Homebuyer Education Program. Please fill out all attached forms and gather all applicable documentation listed in attached document checklist. Information in this application is confidential. It is used to establish eligibility for local and federal program and is only released to persons outside of the program and funding agencies with your written permission.

Date of Application: _____

Class Dates: Option 1 _____ Option 2 _____

Section 1 – Eligibility Requirements:

1. You must be a resident of the City of Austin.
2. Your household's gross annual must be 80% or below the Median Family Income (MFI) for the City of Austin.
3. All City of Austin employees are eligible.

When you have completed these steps, you may submit your application in person, by email, fax, or mail 72 hours before the first class. We look forward to working with you!

- Application** (original) completed & signed.
- Picture Identification** for applicant(s).
Texas Driver's license, Texas Identification Card, or Passport
- Most recent paycheck stub or income verification** (such as Social Security Awards letter) for all household members, 18+ years old

Section 2 – Applicant Information

Name: _____			
	<i>Last</i>	<i>First</i>	<i>Middle Initial</i>
Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Current Address: _____			
City: _____	State: _____	Zip: _____	
Primary E-mail: _____		Secondary E-mail: _____	
Work Phone: _____		Cell Phone: _____	
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widowed <input type="checkbox"/> Divorced			
Are you a: <input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent Resident <input type="checkbox"/> Alien: Alien number A: _____			
Other: _____			

Section 3 – Household Members

List **all persons** (children and adults) living in the home, along with their gross income. By signing in Section 4, you certify, that the current gross monthly and annual income of all persons living in the home has been listed below. Please include child support payments, SSI, SSDI, and VA Benefits.

Total number of persons living in the household: _____

Section 3 – Household Members Cont.

Name	Relationship	Date of Birth	Age/Sex	Gross Income/ Pay Period
SELF				\$
				\$
				\$
				\$
				\$
TOTAL				\$

Section 4 – Demographic Information

APPLICANT

Ethnic Categories (select one)
 Hispanic or Latino Not-Hispanic or Latino

Racial Categories (select all that apply)
 American Indian or Alaska Native Asian Black or African American
 Native Hawaiian or Other Pacific Islander White Other

Other Categories
 Disabled Female Head of Household Elderly City of Austin Employee

I certify that I am a First Time Home Buyer (Never owned a home; have not owned in 3 years; displaced by divorce or natural disaster)
 Yes No

Section 5 – Applicant(s) Signatures

By signing this application you swear under penalty of perjury that the information provided is true and correct to the best of your knowledge. You understand that any omissions or discrepancies found at any time may disqualify you from the program(s) and also may require your immediate repayment of any funds spent. You authorize NHCD or AHFC to contact any source to solicit and/or verify what is necessary for eligibility. You authorize NHCD or AHFC to share and/ or refer you and your information to other organizations or other city departments for additional assistance and/ or to avoid duplication of services.

_____ Signature of Applicant/Guardian	_____ Date
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APPLICATION CHECKLIST - HousingSmarts



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2018 Schedule

You must attend BOTH classes in series to graduate.

Thursdays from 4-8pm	Tuesdays from 1-5 PM
May 3 rd and 10 th	May 22 nd and 29 th
June 7 th and 14 th	June 19 th and 26 th
July 5 th and 12 th	July 24 th and 31 st
August 2 nd and 9 th	August 21 nd and 28 th
No Thursday Classes	September 18 th and 25 th

All Day Friday or Saturday Classes

You must attend class ALL DAY in order to graduate.
 Classes will be held from 9am-5pm

Saturday, June 16 th from 9am-5pm
Saturday July 21 st from 9am-5pm
Saturday August 18 th from 9am-5pm
Friday September 21 st from 9am – 5pm

The City of Austin is committed to complying with the Americans with Disabilities Act (ADA) and Section 504 of the Rehabilitation Act of 1973, as amended. Reasonable modifications and equal access to communications will be provided upon request. Please call (512) 974-3100 (voice) or route through Relay Texas at 711 for assistance. The City of Austin does not discriminate on the basis of disability in providing admission, access to, treatment, or employment in its programs and activities. For complaints regarding your ADA/ Section 504 rights, please contact Dolores Gonzalez, City of Austin ADA/504 Coordinator at (512) 974-3256 or route through Relay Texas at 711.