Cary Christian Center Volunteer Ministry

Housing Application Process

1. You must have a current/up to date application. (Two years to current date)

2. Your application must be filled out completely

3. Most projects can only be done when Cary Christian Center has volunteers. (Unless the project is not major)

4. Before any application is picked it must go through a screening process with manager and the committee.

Thanks,

Dewayne Davis, Volunteer Manager
Date Received: 
CCC Office Info: 

Cary Christian Center, INC
Home Repair Application
Telephone: 662-873-4593 Fax: 662-873-4112 Address: P.O. Box 57 Cary, MS 39054
Volunteer@carychristiancenter.org or Caryscloud@gmail.com

IMPORTANT! In order for us to process the application, all blanks, MUST be filled in!

1. Date: ____________

2. Head of household: _____________________________________________

   Last name                                        First name

3. Physical address: _______________________________________________

   City/State/Address

4. Mailing address: ________________________________________________

   City/State/Address

5. If you live in a rural area, please describe the location of your home.

   ________________________________________________________________________________
   ________________________________________________________________________________
   ________________________________________________________________________________
   ________________________________________________________________________________
   ________________________________________________________________________________

6. Home phone: _________________    Cell phone: ________________________
   Text? (Circle) Yes or NO

7. Do you own this home? (Circle) Yes or No  *Do you rent this house? (Circle) Yes or No

8. What kind of house do you own?  Trailer? (Circle) Yes or No  House? (Circle) Yes or No

9. Do you presently live in this house/trailer/ (Circle) Yes or No

10. Do you own the land the house is on? (Circle) Yes or No  *Is this land 16 section? (Circle) Yes or No
11. Please describe the problem in detail and what work need to be done to your house.

______________________________________________________________________________
______________________________________________________________________________
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______________________________________________________________________________
______________________________________________________________________________

12. How many people live in your household?

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<thead>
<tr>
<th>Name</th>
<th>Relationship to you</th>
<th>Male</th>
<th>Female</th>
<th>Age</th>
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13. Do you have a special need we should be aware of when considering your application?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Signature of the head of household ________________________________