



CREDIT SMART FINANCIAL LITERACY COUNSELING APPLICATION



Dear Client:

We are glad you took the first step and contacted us about your interest in Financial Literacy Counseling. Our Agency provides a comprehensive package of supportive counseling services designed to empower you with the tools you need to establish and achieve your financial goals. We can show you how to eliminate your debt and start you on the road to the financial future you have always dreamed of. To learn more, please visit our website at www.ffcdc.net.

Faith Fellowship Community Development Corporation (FFCDC) is approved by the U.S. Department of Housing and Urban Development (HUD) and our Credit Smart Counseling Program is a free one-on-one counseling service. Our certified Counselors are experienced in financial literacy counseling and will work diligently with you to help you:

- Assess your current financial situation
- Help you develop a realistic spending plan (budget)
- Help you establish achievable financial goals
- Create an Action Plan
- Refer you to a debt management company, if necessary.

You are only (2) two steps away from getting started.

1. Begin the process by immediately completing and returning the attached Service Application and the documents listed below. We are unable to process an incomplete Application so please do your best to complete the Application in its entirety. If the Service Application was emailed to you, you may type your Responses directly on the Application Form and sign it when you are done.
2. Upon receipt of your Service Application, a Counselor will contact you to schedule a face-to-face Appointment. During the Appointment, the Counselor will assess your current financial status, provide an in-depth financial analysis and customize a Work Plan geared towards your financial goals.

Below are the required documents you should send with your Service Application:

- Pay stubs that cover the most recent 30 days of employment and other proof of income (i.e., child support, social security, etc.);
- Most recent two months bank statements;
- Current utility bills;
- Most recently filed Federal Tax Return and W2s;

The Application and documents should be mailed or dropped off at:
Faith Fellowship Community Development Corporation
2707 Main Street Sayreville, New Jersey 08872
Attention: Lucy Bulluck ♦ 732-727-9500 Ext. 1171

Faith Fellowship Community Development Corporation provides counseling in both English and Spanish. You may bring a trusted confidante or family member to facilitate translations we do not provide. Our facility is handicapped accessible with a wheelchair ramp.

Thank you for your interest in our Agency and we look forward to working with you.

Sincerely,
Reverend Clarence Bulluck – Executive Director / VP

PLEASE DO NOT BRING ORIGINAL DOCUMENTS WITH YOU.

YOU MAY TYPE YOUR RESPONSES DIRECTLY IN THE APPLICATION FORM. PLEASE DO NOT E-MAIL IT BACK TO US.

WE RECOMMEND YOU SAVE A COPY THE APPLICATION YOUR RECORDS.

4/15/2016

THIS PAGE INTENTIONALLY LEFT BLANK



CREDIT SMART FINANCIAL LITERACY COUNSELING APPLICATION

DATE OF THIS APPLICATION:
ATTEND A CREDITSMART WORKSHOP WITH US? Yes No
DATE OF ATTENDANCE?

DATE RECEIVED: Mail Drop-off
DATE ASSIGNED:
COUNSELOR:

APPLICANT CONTACT

FIRST NAME: MIDDLE: SUFFIX: JR. SR. III IV
LAST NAME: E-MAIL:
STREET ADDRESS: PREFERRED LANGUAGE: ENGLISH SPANISH
CITY: STATE: ZIP CODE: HOME #: WORK #:
CELL PHONE: SPONSOR: PURPOSE: N/A

CASE DATA

SERVICE TYPE: CREDITSMART FINANCIAL LITERACY
TOTAL # CO-APPLICANTS: (Include Spouse): None 1 2 3 4 5
HOW DID YOU HEAR ABOUT US? Agency(Website) Lender Church Member Realtor Walk-in Word/Mouth
ADDITIONAL FIELDS FUNDING SOURCES: (FOR OFFICE ONLY) CASE (COUNSELING) TERM: Short Mid Long

DEMOGRAPHICS:

RACE: Black or African Amer. White Native Hawaiian/Other Pacific Islander Amer. Indian/Alaskan Native & Black
Hispanic Asian Asian and White American Indian/Alaskan Native American Indian/Alaskan Native & White
Black/African American & White Choose Not to Respond Other:

HISPANIC?: Hispanic Not Hispanic # IN HOUSEHOLD: 1 2 3 4 GENDER: Male Female
VETERAN?: Yes No RURAL STATUS: Does Not Live in Rural Area Lives in Rural Area
HEAD OF HOUSEHOLD?: Yes No ENGLISH PROFICIENCY?: Is English Proficient Is Not English Proficient
ETHNICITY: Mexican Puerto Rican AGE: BIRTHDATE: (mm/dd/yyyy)
FOREIGN BORN? Yes No MARITAL STATUS: Married Single Chose Not to Respond
DISABLED? Yes No DO YOU HAVE A DISABLED DEPENDENT? Yes No

EDUCATION: College Jr. College Graduate School Vocational High School/GED Jr. High Other
FIRST TIME HOMEBUYER? Yes No ACTIVE MILITARY? Yes No

FINANCIAL INFORMATION:

HOUSEHOLD ANNUAL (GROSS) INCOME: \$ ADDITIONAL FIELDS SOC. SEC. #:
COUNTY OF RESIDENCE (I.E., MIDDLESEX): FIRST GENERATION HOMEBUYER? Yes No
CURRENT RESIDENCE: Own Rent YRS. MOS. MONTHLY (GROSS) INCOME: \$

APPLICANT INCOME / EMPLOYMENT

EMPLOYER: _____ DATE START (mm/dd/yyyy):* _____
YEARS IN PROFESSION: _____ SELF EMPLOYED? Yes _____ No _____
TITLE*: _____ TYPE OF BUSINESS*: _____
MONTHLY GROSS INCOME* (before taxes) \$ _____ MONTHLY NET INCOME* (after taxes) \$ _____
EMPLOYER ADDRESS: _____ CITY: _____
STATE: _____ ZIP CODE: _____ TELEPHONE: _____

OTHER SOURCE OF MONTHLY INCOME: \$ _____ (CHECK OTHER SOURCE OF MONTHLY INCOME BELOW)
Alimony _____ Child Support _____ Bonuses _____ Commissions _____ Disability/SSI _____ Welfare _____
Dividends/Interest _____ Overtime _____ Welfare _____ Unemployment _____ Rent _____ Retirement/SSI _____

CO-APPLICANT

FIRST NAME: _____ MIDDLE: _____ SUFFIX: JR. SR. II III _____
LAST NAME: _____ E-MAIL: _____
STREET ADDRESS: _____ CITY: _____ STATE: _____ ZIP CODE: _____
CELL PHONE: _____ PREFERRED LANGUAGE: ENGLISH SPANISH _____
HOME #: _____ WORK #: _____ SOCIAL SECURITY #: _____
MONTHLY GROSS INCOME: \$ _____
RELATION TO APPLICANT: Wife Husband Mother _____ Father Brother Sister Friend Other _____

DEMOGRAPHICS:

RACE: Black or African Amer. _____ White _____ Native Hawaiian/Other Pacific Islander _____ Amer. Indian/Alaskan Native & Black _____
Hispanic _____ Asian _____ Asian and White _____ American Indian/Alaskan Native _____ American Indian/Alaskan Native & White _____
Black/African American & White _____ Choose Not to Respond _____ Other: _____

IS HISPANIC: Hispanic _____ Not Hispanic _____ FOREIGN BORN? Yes _____ No _____ DISABLED? Yes _____ No _____
VETERAN?: Yes _____ No _____ GENDER: Male _____ Female _____ BIRTHDATE: (mm/dd/yyyy) _____

CO-APPLICANT INCOME / EMPLOYMENT

EMPLOYER: _____ DATE START (mm/dd/yyyy): _____
YEARS IN PROFESSION: _____ SELF EMPLOYED? Yes _____ No _____
TITLE: _____ TYPE OF BUSINESS: _____
MONTHLY GROSS INCOME* (before taxes) \$ _____ MONTHLY NET INCOME* (after taxes) \$ _____
EMPLOYER ADDRESS: _____ CITY: _____
STATE: _____ ZIP CODE: _____ TELEPHONE: _____

OTHER SOURCE OF MONTHLY INCOME: \$ _____ (CHECK OTHER SOURCE OF MONTHLY INCOME BELOW)
Alimony _____ Child Support _____ Bonuses _____ Commissions _____ Disability/SSI _____ Welfare _____
Dividends/Interest _____ Overtime _____ Welfare _____ Unemployment _____ Rent _____ Retirement/SSI _____

MONTHLY BUDGET

EXPENSES	PAYMENT	EXPENSES	PAYMENT
~Auto	~~	~Savings	~~
Auto Insurance		Other Savings	
Auto Loan		~Tax	~~
Auto Repairs / Maintenance		~Utilities	~~
Gasoline		Internet	
Parking / Tolls		Cable TV	
~Charity	~~	Cell Phone	
Church Tithing		Electricity	
~Child Support/Alimony	~~	Trash Services	
Daycare		Heating (Nat Gas or Oil)	
~Credit Card Min Payments	~~	Water/Sewer	
Credit Card Min Total		Telephone	
~Credit Collections	~~	Internet/Phone/Cable Bundle	
IRS or other Taxes		DISCRETIONARY	
Judgment		~Charity	~~
~Education	~~	Church Donations	
School Lunches		Other Gift/Donation	
Tuition		~Child Support/Alimony	~~
Books / school supplies		Children Tuition	
~Entertainment	~~	Child School Activities/Lunch	
Athletic Events/Hobbies		~Dining	~~
~Housing Payment	~~	~Education	~~
1st Mortgage		School Fees/Books/Supplies	
2nd Mortgage		~Entertainment	~~
Home Owners Assoc.		Movies / Tickets	
Home Equity Line		~Food and Groceries	~~
Homeowners/Renters Insurance		Food at Work	
Property Tax		Groceries	
Rent		~Gifts	~~
~Installment Loans	~~	Birthday Gifts	
Installment loan		~Household	~~
Student Loan		Personal Items/Toiletries	
~Insurance	~~	Barber/Beauty Shop	
Health Insurance		Clothing	
Life Insurance	~~	Laundry/Cleaning	
~Medical		Fitness Membership	
Dentist		Tobacco	
Doctor Visit / Co-pay		Alcoholic Beverages	
Vision / Glasses / Contacts		~Miscellaneous:	~~
Medical Bills			
Medications		~Pet Expense	~~
~Miscellaneous	~~	Pet Supplies	
Other Description		~Public Transportation	~~
		Bus or Train	
		Rental Property (Expenses)	
SUBTOTAL		SUBTOTAL	



2707 Main Street • Sayreville, New Jersey 08872
Telephone: (732) 727-9500

CREDIT REPORT AUTHORIZATION

I hereby give permission to pull my credit report for the purposes of my application for assistance in regards to pre-purchase counseling at FFCDC.

All information will be kept confidential between my Counselor and me. I further understand that Faith Fellowship Community Development Corporation will be held harmless for information received in this Credit Report.

REQUESTED INFO	APPLICANT	CO-APPLICANT
First Name:		
Middle Name:		
Last Name:		
Suffix:	<input type="checkbox"/> Jr. <input type="checkbox"/> Sr. <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> _____	<input type="checkbox"/> Jr. <input type="checkbox"/> Sr. <input type="checkbox"/> II <input type="checkbox"/> III <input type="checkbox"/> _____
Date of Birth (m/d/yyyy):		
Social Security Number:		
Address:		
City:		
State:		
Zip Code:		

BOTH SIGNATURES ARE REQUIRED IF A JOINT REPORT IS REQUESTED.

Applicant's Signature:

Date:

Co-Applicant's Signature:

Date:



2707 Main Street • Sayreville, New Jersey 08872
Telephone: (732) 727-9500

AUTHORIZATION TO RELEASE INFORMATION

We realize that the concerns you bring to us are highly personal in nature. We assure you that all information shared both orally and in writing will be managed within the limitations of law. Your “nonpublic information,” such as your total debt information, income, living expenses and personal information concerning your financial circumstances, will be provided to program monitors, and others only with your authorization and signature below. We may also use anonymous aggregated case file information for the purpose of evaluating our services, gathering valuable research information and designing future programs.

With your authorization, we may share your data with the following entities or their representatives for the purposes of program management, compliance monitoring, and program evaluation:

- Staff of our Agency that need it to work on your case;
- Middlesex County Housing and Community Development—American Dream Downpayment Initiative (ADDI) Program;
- Any other downpayment initiative program;
- Department of Housing & Urban Development (HUD);
- Any other entity properly authorized under law to view your data.

I hereby authorize **FAITH FELLOWSHIP COMMUNITY DEVELOPMENT CORPORATION** to collect, share and release information as described above.

Applicant’s Signature

Co-Applicant’s Signature

Date

Date



Disclosure Statement

Faith Fellowship Community Development Corporation (FFCDC) is required to fully disclose potential and actual conflicts of interest so that clients are in a position to make fully informed decisions.

FFCDC provides comprehensive housing counseling services including, but not limited to, pre- and post-purchase homeownership, credit/budgeting, and mortgage delinquency and foreclosure prevention

TYPES OF SERVICES PROVIDED:

- **Homeownership Counseling:** FFCDC provides Homeownership Workshops and free one-on-one home ownership counseling to first time homebuyers who are interested in knowing the facts about buying a home and about low interest rate loan programs.
- **Credit/Budget Counseling:** FFCDC provides Credit/Budget Workshops and free one-on-one counseling. The counselor helps to analyze the financial and credit situation, identify barriers to affordable mortgage financing and other housing problems and develop a plan to remove barriers. The counselor also provides assistance in debt management by helping to prepare a monthly, manageable budget and spending plan which will enable the client to resolve his/her personal financial challenges.
- **Foreclosure Prevention Counseling:** FFCDC provides free Foreclosure Prevention Workshops and free foreclosure counseling to families who are in danger of losing their homes because of a default or potential default on their mortgage payments. Assistance is provided with the following mitigation options: loan forbearance, loan modification, partial claim, pre-foreclosure sale, and deed-in-lieu of foreclosure.
- **Technical Assistance for Corporations:** FFCDC and our partners provide training and technical assistance to other faith-based (FBO) and nonprofit organizations (NPO). Using the leading nonprofit assessment tool, Elements of an Effectively Managed Organization (EEMO™), we cover leadership, mission, planning, structure, systems, results, and much more.

SOME OF OUR PARTNERS

Brand New Day, Bank of America, Borough of Woodbridge, NJ Department of Banking & Insurance, NJ Housing & Mortgage Finance Agency, NJ Citizen Action, City of Perth Amboy, Hong Kong Savings Bank (HSBC), Freddie Mac, NJ Administrative Office of the Courts, NJ Housing Network, PNC Bank, FDIC, Fannie Mae, Puerto Rican Association for Human Development of Perth Amboy, Faith Fellowship Ministries World Outreach, Center, Department of Housing & Urban Development (HUD), Rutgers University-NJ Small Business Development Centers, Info-line of Middlesex County, Magyar Bank, State of New Jersey, Attorney General's Office, MetLife Bank, Middlesex County Housing and Community Development (ADDI Program), NeighborWorks@America, NJ Department of State, Office of Faith-Based Initiatives (OFBI), Sovereign Bank, TD Bank, Township of Sayreville, Wells Fargo, William Paterson University.

ALTERNATIVE SERVICES AND PROGRAMS

- **The Middlesex County Department of Housing and Community Development** makes available downpayment and closing cost assistance funds to income-eligible, first time homebuyers under the Department of Housing and Urban Development (HUD) American Dream Downpayment Initiative (ADDI) program.
- **New Jersey Foreclosure Mediation Program** provides housing counselors, lawyers, and mediators to homeowners facing foreclosure.
- **HOPE NOW:** An alliance between counselors, mortgage companies, investors, and other mortgage market participants. This alliance will maximize outreach efforts to homeowners in distress to help them stay in their homes and will create a unified, coordinated plan to reach and help as many homeowners as possible.
- Other downpayment assistance programs.

FFCDC does not have the authority to deny or approve any mortgage loan.

You have the right to make the final decision regarding your housing needs and to seek additional opinions regarding your options regardless of any recommendations of FFCDC, its affiliates or partnerships.

You not obligated to receive or utilize any services offered by FFCDC, its affiliates or partnerships in order to participate in our housing counseling program.

I acknowledge that I have reviewed and understand the above.

Applicant's Signature

Date

Co-Applicant's Signature

Date

Counselor Signature

Date



2707 Main Street • Sayreville, New Jersey 08872
Telephone: (732) 727-9500

Privacy Policy

FAITH FELLOWSHIP COMMUNITY DEVELOPMENT CORPORATION is committed to assuring the privacy of individuals and/or families who have contacted us for assistance. We realize that the concerns you bring to us are highly personal in nature. We assure you that all information shared both orally and in writing will be managed within legal and ethical considerations. Your non-public personal information, such as your total debt information, income, living expenses and personal information concerning your financial circumstances, will be provided to creditors, program monitors, and others only with your authorization and signature on the Authorization to Release Information. We may also use anonymous aggregated case file information for the purpose of evaluating our services, gathering valuable research information and designing future programs.

Types of information that we gather about you:

- Information we receive from you orally, on applications or other forms, such as your name, address, social security number, assets, and income;
- Information about your transactions with us, your creditors, or others, such as your account balance, payment history, parties to transactions and credit-card usage; and
- Information we receive from a credit reporting agency, such as your credit history.

You may opt-out of certain disclosures

1. You have the opportunity to opt-out of disclosures of your nonpublic personal information to third parties (such as your creditors), that is, direct us not to make those disclosures.
2. If you choose to opt-out, we will not be able to answer questions from your creditors. If at any time, you wish to change your decision with regard to your opt-out, you may call us at (732) 727-9500, ext. 1704 and do so.

Release of your information to third parties

1. So long as you have not opted-out, we may disclose some or all of the information that we collect, as described above, to your creditors or third parties where we have determined that it would be helpful to you, would aid us in counseling you, or is a requirement of grant awards which make our services possible.
2. We may also disclose any nonpublic personal information about you or former customers to anyone as permitted by law (e.g., if we are compelled by legal process).
3. Within the organization, we restrict access to nonpublic personal information about you to those employees who need to know that information to provide services to you. We maintain physical, electronic and procedural safeguards that comply with federal regulations to guard your nonpublic personal information.

I / WE HAVE READ AND UNDERSTAND THE PRIVACY POLICY.

Applicant's Signature:

Date:

Co-Applicant's Signature:

Date: