

**APPLICATION FOR SERVICES**  
**(FINANCIAL)**

Date of Application: \_\_\_\_\_

Applicant's Full Name: \_\_\_\_\_

Applicant's Present Address: \_\_\_\_\_  
\_\_\_\_\_

Date Applicant Moved To This Address: \_\_\_\_\_ Applicant's Phone Number: \_\_\_\_\_

Applicant's Birthdate: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Names of Applicant's Parents: \_\_\_\_\_

Applicant's Legal Guardian Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Date Guardian Was Appointed: \_\_\_\_\_

Does Applicant Receive: SS or SSI (circle one) What Is The Amount Received? \_\_\_\_\_

Is The Applicant Employed? YES \_\_\_\_\_ NO \_\_\_\_\_ Where Employed? \_\_\_\_\_

Child Support Amount: Received \_\_\_\_\_ Paid \_\_\_\_\_

List Other Sources of Income & Amounts: \_\_\_\_\_  
\_\_\_\_\_

List Other Outstanding Debts & Amounts: \_\_\_\_\_  
\_\_\_\_\_

Does Applicant Have Any Checking or Savings Accounts? YES \_\_\_\_\_ NO \_\_\_\_\_

If Yes, List Name of Institution(s) and Balance of Account(s) Below:  
\_\_\_\_\_  
\_\_\_\_\_

Applicant's Landlord Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Amount Of Rent: \_\_\_\_\_

Is Applicant Related To The Landlord? YES \_\_\_\_\_ NO \_\_\_\_\_

Does Applicant Have Any Roommates? YES \_\_\_\_\_ NO \_\_\_\_\_

Name(s) Of Roommate(s) (if applicable) \_\_\_\_\_

Will OHI Be Providing Any Services Other Than Payee? YES \_\_\_\_\_ NO \_\_\_\_\_

(Turn over)



OPPORTUNITY HOMES, INC.

606 Iowa Avenue, PO Box 166, Decorah, IA 52101 Phone: 563-382-8140 Fax: 563-382-5049

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(FINANCIAL)

Sex: \_\_\_\_\_ Marital Status: \_\_\_\_\_

Medicaid No.: \_\_\_\_\_ Medicare No.: \_\_\_\_\_

Case Manager: \_\_\_\_\_ County: \_\_\_\_\_

\_\_\_ **Trustee** Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_ **Conservator** Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_ **Payee** Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**Current Primary Caregiver or Provider:**

Name: \_\_\_\_\_ Birthplace: \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

\_\_\_\_\_ Business Phone: \_\_\_\_\_