

Mom's House 2505 Franklin Ave. Toledo, Ohio 43610 419-241-5554

Name of Parent	Birth Date			
Name of Child(ren)	Bi	rth Date		
Address	City	State	Zip	Phone
Living Arrangements (circle the	ose that apply)			
Parents Relativ	ve Alone	Other		
Means of Support of Applicant				
Parents Public Assis	stance Child's Fath	ner Employr	ment	
Other				
Marital Status				
Single Divorc	sed Separated			
School Information				
Circle the highest grade		10 11 12 n School	10 11 10	16 College
Other Information:				
At what school are you	currently enrolled?			
Name of your school co	ounselor			
Where do you plan to e	enroll?			
Starting date?	Projected grad	luation date		
Where did you hear abo	out Mom's House?			
In what other programs	are you currently enro	led?		
Please describe your tra	ansportation arrangeme	nts:		

Please be aware that we will require you to provide a copy of your most recent grades and proof of eligibility (WIC card, Welfare check stub, paycheck stub, or tax record, etc.) This can be included with your application now or it can be furnished when we contact you for an interview. You will be placed on our waiting list when we receive your completed application and contacted for an interview when a position becomes available. Please inform us of any changes in your situation. Thank you!