



Finding Hope “All About U” Application

Today’s Date ___/___/___

Note: Please ensure that you reside in one of the following zip codes: 76137, 76148, 76182, 76180, 76054, 76118, 76117, 76053, 76022, 76095

Please return to info@centerpointchurch.com.

PERSONAL INFORMATION

Name _____ Father’s Name _____

- Married Divorced Single or Widowed Living Together
- Separated Engaged In a Relationship

Current Living Status

- House Apartment/Condo Hotel/Motel Unhoused

Address _____ Apartment # _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

Email address: _____

How long have you lived at your current address? _____



Lives With

Alone Family Partner Roommate(s)

Names of others living in your home (including all children and adults):

Name:	Relationship:	Age:
_____	_____	_____
_____	_____	_____
_____	_____	_____

Due Date? _____

Employment Status?

Full Time Parttime Unemployed

Partners' Employment Status

Full Time Parttime Unemployed

How Long? _____

Support System Yes No

If you checked Yes who is your Support System? _____



of Children _____

Current State of Mind?

Parent

Adoption

Abortion

Are you Safe at Home? Yes No

Immediate Needs?

- Food
- Support
- Medical
- Other

- Housing
- Clothing



If "other" what is your immediate need(s)? _____

What steps have you taken to meet these current needs?

INVOLVEMENT AT CHURCH:

Do you regularly attend church? Yes No If yes, what church? _____

How did you hear about CPC? _____

Relationship with Center Point Church:

Member (*signed covenant*) Have Visited CPC Regularly Attend Friend of a member

Member's Name? _____ Member's Phone _____



OUR AGREEMENT:

I understand that by signing below I am giving CPC permission to have a member of the Finding Hope Ministry contact me by using the information that I have provided above. The church is not obligated to assist me in any way.

Signature _____ Date _____