

PLEASE COMPLETE PRIOR TO ENROLLMENT

PC 1000 APPLICATION

TODAY'S DATE _____

NAME _____ DATE OF BIRTH _____

SEX _____ RACE _____ DL# _____ SS# _____

ADDRESS _____
Street City State Zip

PHONE _____ MESSAGE PHONE (not your own) _____

Do you work? _____ Where? _____ Monthly Income \$ _____

Do you receive AFDC? _____ How much per month? _____

Do you receive SSI? _____ How much per month? _____

Who supports you? _____ Do you own a car? _____

Case # _____ Court Date _____ Charge _____

Date of arrest _____ Attorney _____