

# PROSPERITY WORKS INDIVIDUAL DEVELOPMENT ACCOUNT APPLICATION

Initial:	Last Name:
State:	Zip Code:
	·
Cell:	
ne:	
sage	Email
Initial:	Last Name:
Stato	7in Codo:
State:	Zip Code:
Cell:	
for your paych	neck? Yes No
	nsgender
Asian Americ	an/Pacific Islander 🗌 Caucasian
	can   Other
<ul><li>☐ Married</li><li>Widowed</li></ul>	☐ Separated ☐ Other
	yed Retired Student
-u	
	ived AA Degree Graduated 2 year College
	State:  Cell:  State:  Cell:  for your paych  Tra  Asian America  Native America  Native America  Widowed  ded PT Emplo



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		ne or Enrollment:				\	
	Jrban Area – Al rea (less than 5	buquerque (metropolitan s 0,000)		ea with population Remote Area (les		)00,000.)	
Household	Information:						
		plication, a household is de	efined as a ui	nit financially dep	endent on each othe	r. If you	
		t or living under the same r			-	_	
-	-	e considered your own hou			•		
		hers that live with you. <i>If t</i>		of Household mer	nbers is different on	your	
application	vs. your tax jo	rm, please attach an expla	ination.				
	people in your l	nousehold. Indicate if they	have month	ly income, and if	so, please bring their	tax	
Were you H	lead of Househ	old on your last tax form?		Yes	No		
	adults living wi						
		18 years old living with you	J:				
	er of househol						
-	urchase 🗀 Un	wed For: ☐Home ☐Educa	ation <b>u</b> Bus	iness Home in	provements		
■ Verificie F	dichase 🗕 Oil	KIIOWII					
Income:							
Enter Yo	ur Monthly Ear	ned Income:					
		Your monthly gross income before taxes					
	Monthly self-employment income (selling things you make, sewing, child care, etc.)						
		Monthly investment inco	me				
		Monthly gross income of employed	other memb	oers in your house	ehold who are curren	itly	
		Other monthly earned income. This does not include alimony, child support, SSI/SDI, or food stamps.					
		Total monthly earned income					
		Total Annual Earned Income (monthly amount multiplied by 12)					
		What is your adjusted gr	oss income f	from your last ye	ar's tax form?		
O.1 ·	TI 6 !!						
		ing income types are collec				_	
eligibility:	Alimony Pay	ment: Child Support:	•	SSI/SSD:	Food Sta	mps	
	\$	<u> </u>		\$	\$		



**Total Assets** 

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Currently Eligible?			Current	ly R	eceiving?	Ever Re	ceive	<u>d</u> ?
TANF: State EITC: Federal EITC:	□Yes □Yes □Yes	□ No □ No □ No			No No	□Yes □Yes □Yes		0
Assets: Please use supp	orting d	ocumentation i	to complet	e th	is sheet.			
Assets: Do you own following?	the	What is th	ne value?		Liabilities?			What is the loan amount that you owe?
Home (that you own)					Mortgage 1 balance			
Second home					Mortgage 2 balance			
Vehicle 1					Vehicle 1			
Vehicle 2					Vehicle 2			
Business value					Business debt			
Residential rental proper land	erty or				Residential rental pro land debt	perty or		
Stocks & bonds, retiren funds, or other Investm					Past due household b	ills		
(continued) Assets: Do you owr following?	the	What is th	ne value?		Liabilities?			What is the loan amount that you owe?
Checking account (if an different than on state please explain)					Credit card debt			
Savings account not a (if amount different the statement, please expl	an on				Student loans			
	_				Medical bills			

Other loans

**Total Liabilities** 



Date\_\_\_

## PROSPERITY WORKS INDIVIDUAL DEVELOPMENT ACCOUNT APPLICATION

Total Assets	+\$	
Total Liabilities	- \$	
Net Worth (Cannot be over \$10,000.00)	=\$	

#### **ACKNOWLEDGEMENT, PERMISSION, AND SIGNATURES:**

### Personal Data and Consent for Communication

I understand that all information I have provided will be treated as confidential. I consent to allow this information to be shared with the IDA administrating organization (Prosperity Works), as necessary, for data collection and reporting, as well as determining eligibility.

**Credit Report/Score:** I agree to allow Prosperity Works to pull my credit report and score at the time I am authorized to open an IDA account -- as well as when I am ready to purchase an asset -- in order to establish a beginning and ending score.

initials:	
Custodial Savings Account: I agree to let Prosper	ity Works open a custodial savings account in my name.
of my knowledge. I have fully disclosed the finan information on all of my financial accounts. <i>If I h</i>	rerify that the information that I have provided is true to the best acial situation of my household, as well as provided full ave intentionally provided any incorrect information or am found a initiative, I may be asked to withdraw my participation.
By signing this, I agree to the above statements.	
Participant Printed Name	Participant Signature