

Interview Date:
Results:

# Life Services Maternity Home APPLICATION

<b>Please respond to the following questions prior to your interview – Thank you Answers do not determine admission. They help determine your needs.</b>						
Full Name of Applicant						
<b>Check one:</b>	<i>Single</i>	<i>Engaged</i>	<i>Married</i>	<i>Separated</i>	<i>Divorced</i>	<i>Widowed</i>
Address				Phone (    )		
Email Address				Date of Birth		Ethnicity
Do you have Confirmation of Pregnancy?			What is your Expected Due Date?			
What is your current living situation, and why do you need housing?						
Describe your Physical/Emotional Health Issues						
Do you have a criminal background? Yes <input type="checkbox"/> No <input type="checkbox"/> <i>If yes, please briefly explain</i>						
Please briefly explain any past or present drug/alcohol use						
<b>Conclusion</b>						
<i>No potential resident shall knowingly withhold <b>Medical/Health/Safety</b> information or fail to disclose such pertinent information to <b>Life Services</b></i>						
<b>To the best of my knowledge, I affirm that the above given information is true</b>						
<b>Applicant Signature:</b>				<b>Date:</b>		

*Life Services Maternity Home provides shelter, food, resource information and connections,  
but is not responsible for medical expenses or prescriptions.  
It is the responsibility of the resident or the resident's parent to cover these expenses.  
If you are unable to cover your medical expenses, please inform Life Services Maternity Home staff during the interview process.*