CROSSROADS PROGRAM APPLICATION

NORTH DAKOTA DEPARTMENT OF HUMAN SERVICES
PUBLIC ASSISTANCE DIVISION
SFN 29 (11-2014)

Clear Fields

Please print or type your answer. Read application carefully, answer each question completely.

Tell us about you

Name (First, Middle Initial, Last)			Date of Birth	
Gender ☐ Male ☐ Female	Race (see codes below)	Marital Status (see codes below)	Education Level Completed	
Telephone Number	Cell Phone Number		Social Security Number*	
Residential Address		City	State	ZIP Code
Mailing Address		City	State	ZIP Code

Marital Status Codes: **MA** - Married **DI** - Divorced **NM** - Never Married **WI** - Widow
Race Codes: **AI** - American Indian/Alaska Native **AP** - Asian **BL** - Black **HP** - Native Hawaiian/Pacific Island **WH** - White

Tell us about your child(ren) in your home

Name (First, Middle Initial, Last)	Social Security Number (optional)*	Date of Birth	Gender	Race (see codes below)

Race Codes: **AI** - American Indian/Alaska Native **AP** - Asian **BL** - Black **HP** - Native Hawaiian/Pacific Island **WH** - White

Tell us about your school - Attach proof of your school enrollment. (Class Schedule)

School Name			Telephone Number
Address	City	State	ZIP Code

I authorize the release of information concerning my participation in the Crossroads Program to the county social service agency, case manager, and any other Department of Human Services personnel involved in this program. I understand information about me is confidential.

Applicant Signature	Date

* The Privacy Act of 1974 requires the following information be provided when individuals are requested to disclose their social security numbers. Disclosure of the social security number is voluntary and it is requested for identification purposes. Failure to disclose this information will not affect participation in this program.

Submit completed application to:
Crossroads Program EAP - Public Assistance
600 East Boulevard Ave - Dept. 325
Bismarck, ND 58505-0250

701-328-1060 Fax Number
701-328-2332 Telephone Number

STATE OFFICE USE ONLY

Date Approved
Date Denied
By