## 

## **Demographic Information**

**Instructions:** Applicants for the MI Neighborhood (MIN) Program must complete this form and submit with the initial MIN application. This information is collected in order to help certify that the application process is open and fair. Each household must be given the opportunity to disclose this information. Parents or guardians are asked to complete this disclosure on behalf of household members who are under the age of 18. Individuals who do not wish to provide some or all of this information are asked to select the corresponding box when appropriate. There is no penalty for households or individuals who do not wish to provide information. <u>This should match the Household Income Certification Form information.</u>

Property Address:	Unit Number:
Zip Code:	

## **Household Composition**

Complete for each individual living in the housing unit. Check all that apply:

Name (Print):		Date of Birth:	
Full-Time Student:	Yes	🗌 No	
Marital Status:	Married	Single	Do Not Wish to Provide
Ethnicity:	Hispanic/Latino	Not Hispanic/Latino	Do Not Wish to Provide
Gender:	☐ Male	E Female	Non-Binary
			Do Not Wish to Provide
Race:	American Indian or	🗌 Asian	Other/Multiracial
	Alaska Native	White	
	Black or African American	Native Hawaiian or	Do Not Wish to Provide
		Other Pacific Islander	
Disability Status:	Disabled	Not Disabled	Do Not Wish to Provide

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Full-Time Student:	Yes	🗌 No	
Marital Status:	Married	Single	Do Not Wish to Provide
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