

Last Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

# Elves in Disguise

## Family Make-over Application, 2015

This is an application for a charitable home makeover. All applicants will be thoroughly screened. You are encouraged to ask your caseworker or a trusted friend to assist you in completing your application, or you may complete it on your own. Please write neatly and include as many copies of photos and other documentation as you wish. These will not be returned. Do not send originals. Scan your application to [suzi@thepetroffs.com](mailto:suzi@thepetroffs.com) or mail it to New Hope Foundation, PO Box 12663, Dallas, TX 75225. Applications must be received by August 1, 2015. View previous makeovers or access the printable PDF version of this application at [www.NewHopeFoundation.com](http://www.NewHopeFoundation.com).

In order to be considered, applicants must currently:

- ✓ Be eligible for government assistance due to poverty, age, disability, or veteran status even if not accepting it,
- ✓ Not be a registered sex offender or indicted for a sex crime,
- ✓ Have at least one child (under 18) living in the home,
- ✓ Be drug and crime free (past offenses will not count against applicants),
- ✓ Live in Dallas County or one of its neighboring counties,
- ✓ And must be actively engaged in some sort of self-improvement.

\_\_\_\_ Check here if you are nominating someone else for the home makeover, and complete the following information:

Your name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to nominee: \_\_\_\_\_ Is the candidate aware you are making the nomination? Y N

\*\*Please include a letter giving your most heartfelt reasons for nominating this person. May we show this person your letter? Y N

### Parent information (only include parents living in the home)

1. Last Name ONLY: \_\_\_\_\_ (We will ask for your first name if you are interviewed)
2. DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_ Are you the head of the house? Y N
3. HS Diploma? Y N GED? Y N College? Y N How much? \_\_\_\_\_
4. Driver's License Y N # \_\_\_\_\_ State \_\_\_\_\_ Male Female
5. Marital Status \_\_\_\_\_ If married, does your spouse live with you? Y N
6. Do you receive government assistance of any sort? Y N If yes, explain *in detail* what you receive, how often, and the value. If you are selected, you will be asked to provide proof.  
\_\_\_\_\_  
\_\_\_\_\_
7. Are you employed? Y N If yes, what do you do? \_\_\_\_\_
8. Are you physically capable of employment? Y N If yes, and you are currently unemployed, briefly explain your circumstances.  
\_\_\_\_\_  
\_\_\_\_\_
9. What is your monthly income *not including government support*? \_\_\_\_\_
10. Have you ever been accused of a sex crime? Y N
11. Have you ever been indicted for any felony? Y N If yes, has your penalty been fully served? Y N If no, explain:
12. How many children live with you, and what are their ages (no names, please). \_\_\_\_\_  
Child 1: M F Age \_\_\_\_ Child 2: M F Age \_\_\_\_ Child 3: M F Age \_\_\_\_ Child 4: M F Age \_\_\_\_  
Child 5: M F Age \_\_\_\_ Child 6: M F Age \_\_\_\_ Child 7: M F Age \_\_\_\_ Child 8: M F Age \_\_\_\_  
Does anyone else live with you? Y N Explain *in detail*

Last Name: \_\_\_\_\_  
Phone Number: \_\_\_\_\_

**Parent 2 (*only include parents living in the home*)**

1. Last Name ONLY: \_\_\_\_\_ (We will ask for your first name if you are interviewed)
2. DOB: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age \_\_\_\_\_ Are you the head of the house? Y N
3. HS Diploma? Y N GED? Y N College? Y N How much? \_\_\_\_\_
4. Driver's License Y N # \_\_\_\_\_ State \_\_\_\_\_ Male Female
5. Marital Status \_\_\_\_\_ If married, does your spouse live with you? Y N
6. Do you receive government assistance of any sort? Y N If yes, explain *in detail* what you receive, how often, and the value. If you are selected, you will be asked to provide proof.  
\_\_\_\_\_  
\_\_\_\_\_
7. Are you employed? Y N If yes, what do you do? \_\_\_\_\_
8. Are you physically capable of employment? Y N If yes, and you are currently unemployed, briefly explain your circumstances.
9. What is your monthly income *not including government support*? \_\_\_\_\_
10. Have you ever been accused of a sex crime? Y N
11. Have you ever been indicted for any felony? Y N If yes, has your penalty been fully served? Y N If no, explain:

**FAMILY:**

- What is the total monthly income for the above adult(s)? \_\_\_\_\_
  - What is the total monthly assistance, including disability, food assistance, and checks for the above adult(s)? \_\_\_\_\_
  - Is there any regular child support? If so, what is the monthly total? \_\_\_\_\_
  - Do you receive any additional (irregular) child support? About how much do you average per month? \_\_\_\_\_
  - Is there any additional income? Any trading of services (for example, you babysit for someone in exchange for car repair work)? If so, explain.
12. Which best describes the head of house for this family?
    - I own my home
    - I rent my home
    - I live with someone, and this person is the owner/renter
    - Other (explain) \_\_\_\_\_
  13. How many bedrooms are in your home? \_\_\_\_\_ How many bathrooms are in your home? \_\_\_\_\_
  14. My life would be so much better if my home had \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  15. Interests and hobbies \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  16. If you could achieve one thing **in the next few months** to improve your life, what would it be?  
\_\_\_\_\_  
\_\_\_\_\_

Last Name: \_\_\_\_\_

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17. If you could work toward one or two **long-term** goals to improve your life, what would they be?

\_\_\_\_\_

18. What would you change in your life (or your kids' lives) today to give your children the greatest hope for their own futures? \_\_\_\_\_

\_\_\_\_\_

19. What are you doing to better yourself or to reach your goals? \_\_\_\_\_

\_\_\_\_\_

20. Tell us a little about some of the difficulties you have faced, how they affected you, and what you are doing to ensure your child or children enjoy better and healthier lives.

21. Why are you a good candidate for a home makeover?

**About your home** Address: \_\_\_\_\_

- *If you own your home*, what are some things that are currently broken, need updating, or need repair? *If you do not own*, go to the next question.

- If you do not own your home, what are some things that need to be improved or repaired? What steps have you taken to have these items improved or repaired? Has the landlord/owner cooperated? Explain.

Last Name: \_\_\_\_\_ PRINT EXTRA COPIES OF THIS PAGE IF NEEDED  
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**Child 1 2 3 4 5 6 7 8:** Name: \_\_\_\_\_ Boy Girl DOB \_\_\_\_\_ Age \_\_\_\_\_

- Grade: \_\_\_\_\_ School: \_\_\_\_\_
- School uniform colors: \_\_\_\_\_
- Favorite colors: \_\_\_\_\_
- Favorite hobbies: \_\_\_\_\_
- Interests: \_\_\_\_\_
- Does this child have his/her own room? Y N If yes, who is this child's roommate? \_\_\_\_\_
- Weight: \_\_\_\_\_ Weight: \_\_\_\_\_
- Sizes: Pant \_\_\_\_\_, Shirt \_\_\_\_\_, Shoe \_\_\_\_\_, Other: \_\_\_\_\_
- This child would really benefit from having \_\_\_\_\_
- If this child could have an awesome bedroom, it would be \_\_\_\_\_
- Is there anything else we should know about this child?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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