



MI NEIGHBORHOOD

## 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. This should match the Household Income Certification Form information.

<b>Property Address:</b>	<b>Unit Number:</b>
<b>Zip Code:</b>	

### Household Composition

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

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

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