

# Joi's Angels

## Furniture/Household Items/Clothing Assistance Program Application

EAST ORANGE RESIDENTS ONLY

DATE-

\_\_\_\_\_

CLIENT NAME

DATE OF BIRTH

(First)

(Last)

(Month, Day, Year)

ADDRESS

(Street)

(City)

(State)

(Zip Code)

PHONE

(Mobile)

(Home)

(Work)

EMAIL ADDRESS

\_\_\_\_\_

SOCIAL MEDIA

(Facebook)

(Twitter)

(SnapChat)

(Instagram)

ETHNICITY

African American ☐ Asian ☐ Caucasian ☐ Latin American/Hispanic ☐

Indian ☐ Native American ☐ Other ☐ I prefer not to answer this question ☐

GENDER

Male ☐ Female ☐ Transgender ☐

MARITAL STATUS

Single ☐ Married ☐ Widowed ☐ Divorced ☐ Separated ☐

HOUSING STATUS

Rent ☐ Own ☐ Shelter ☐ Living with family/friends ☐ Other ☐

GROSS MONTHLY  
HOUSEHOLD INCOME  
(Adults & Children)

\$\_\_\_\_\_ .00

PLEASE CHECK ALL  
SOURCES OF INCOME

Employment Wages ☐ Self-Employment Wages ☐ TANF ☐ FSP ☐ SSI ☐

Social Security ☐ SSDI ☐ WIC ☐ Medicaid ☐ Child Support ☐ Alimony ☐ Disaster Relief ☐

Foster Care ☐ Other ☐

**NUMBER OF CHILDREN IN  
HOUSEHOLD**

(Under the age of 18)

**NUMBER OF CHILDREN IN  
HOUSEHOLD**

(Age 18-24 attending  
school)

**TOTAL NUMBER OF  
HOUSEHOLD MEMBERS**

(All adults and children)

**NAMES AND AGES OF  
CHILDREN**

(Name)

(Age)

(Name)

(Age)

(Name)

(Age)

(Name)

(Age)

**HIGHEST LEVEL OF  
EDUCATION**

(Check One)

Grammar School ☐ High School ☐ Some College ☐ Associate's Degree ☐

Bachelor's Degree ☐ Graduate Degree or Above ☐

**APPLICANT NAME AND SIGNATURE**

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**END OF APPLICATION** Below for Office Use Only

**PROOF OF ELIGIBILITY** ☐  
(Copied and Attached)

**DELIVERY DATE:**

**Process Start Date**

**Process End Date**

NJ Photo Identification ☐ Proof of East Orange Address ☐ Paystub ☐ Benefit Award Letter ☐ TANF ID ☐

Snap Card ☐ Medicaid Card ☐ Social Security Card ☐ Other ☐

Application: Accepted ☐ Declined ☐ Wait Status \_\_\_\_\_

Notes (Missing Items List): \_\_\_\_\_

Staff Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_