



## FINANCIAL ELIGIBILITY WORKSHEET

Please provide complete and accurate information below, as this will be used to determine whether you financially qualify for pro bono legal assistance. **We cannot assess your eligibility with incomplete information.** 

| Name:              |  |                                      | Today's Date:                        |   |
|--------------------|--|--------------------------------------|--------------------------------------|---|
| Date of B          | irth:  |                                      |                                      |   |
| <u>STEP 1</u> : I  | DOCUMENTS  |                                      |                                      |   |
| ma<br>no           | ay redact your Social  | Security Number an . If you have not | d bank informatio<br>filed a tax ret | n. Please make sure the tax return is urn, or if your current income is know. |
| <b>STEP 2</b> : A  | ADDITIONAL INFORMA   | TION                                 |                                      |   |
| a.A                | Are you (check one):   | b. You have                          | dependent(s).                        | c. Do you have a car?   |
| ☐Married ☐Divorced |  |                                      | □Yes                                 |   |
| ☐Single ☐Separated |  |                                      | □No                                  |   |
|                    | $\square$ Widowed  |                                      |                                      |   |
| d.                 | Your rent/monthly mo   | ortgage payment is:                  | \$                                   |   |
| e.                 | If you own real estate   | , the fair market value              | e is: \$                             | -   |
| f.                 | Do you receive <b>monetary support</b> from a source other than professional income or government benefits (fo example, family support, alimony, inheritance, trust fund)? If so, please state the source, the amount, and the frequency of payment. Attach additional pages if necessary. |                                      |                                      |   |
| g.                 | List all <b>bank account balances</b> (do not provide account numbers). Attach additional pages if necessary.  |                                      |                                      |   |
|                    | Checking:  |                                      |                                      |   |
|                    | Savings:   |                                      |                                      |   |
|                    | Retirement:  |                                      |                                      |   |
|                    | Other:   |                                      |                                      |   |
| h.                 | List the total value of  |                                      | _                                    | stocks and money market funds): \$  |