

Model Housing Needs Assessments, *continued*

Cheyenne River Housing Authority Housing Needs Survey

III III III III III III III III

<p>B4. Are you an enrolled member of the Cheyenne River Sioux Tribe?</p> <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p>	<p>C2. If every individual or group in this unit who wanted to live separately was able to have their own unit, how many units would be needed? Please list the number of people who would live in each unit based on their age. If you do not need additional housing, please complete only "Unit 1" for everyone currently living with you (should equal answer to C1).</p> <p>Unit # 1 (Your unit):</p> <p>Elders 70+ <input type="checkbox"/></p> <p>Older Adults 55-69 <input type="checkbox"/></p> <p>Adults 18-54 <input type="checkbox"/></p> <p>Children 17 or younger <input type="checkbox"/></p> <p>Unit # 2:</p> <p>Elders 70+ <input type="checkbox"/></p> <p>Older Adults 55-69 <input type="checkbox"/></p> <p>Adults 18-54 <input type="checkbox"/></p> <p>Children 17 or younger <input type="checkbox"/></p> <p>Unit # 3:</p> <p>Elders 70+ <input type="checkbox"/></p> <p>Older Adults 55-69 <input type="checkbox"/></p> <p>Adults 18-54 <input type="checkbox"/></p> <p>Children 17 or younger <input type="checkbox"/></p> <p>Unit # 4:</p> <p>Elders 70+ <input type="checkbox"/></p> <p>Older Adults 55-69 <input type="checkbox"/></p> <p>Adults 18-54 <input type="checkbox"/></p> <p>Children 17 or younger <input type="checkbox"/></p> <p>Unit # 5:</p> <p>Elders 70+ <input type="checkbox"/></p> <p>Older Adults 55-69 <input type="checkbox"/></p> <p>Adults 18-54 <input type="checkbox"/></p> <p>Children 17 or younger <input type="checkbox"/></p>
<p>B5. If you are not an enrolled member of the Cheyenne River Sioux Tribe, are you an enrolled member of another Tribe?</p> <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p>	
<p>B6. Other Tribe Name: <input type="text"/> <input type="text"/> <input type="text"/></p>	
<p>B7. Are any other members of your household enrolled members of the Cheyenne River Sioux Tribe?</p> <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p>	
<p>B8. What is your marital status? <i>Select one</i></p> <p>Married <input type="checkbox"/></p> <p>Unmarried couple living together <input type="checkbox"/></p> <p>Single (Never married, Divorced, Widowed) <input type="checkbox"/></p>	
Section C: Current Housing	
<p>C1. What is the total number of people staying in this housing unit? Please include all individuals who:</p> <p>1. Usually live in this unit, even if they are temporarily away 2. Persons who stay in the unit due to a lack of housing elsewhere 3. Those individuals who stay in the unit occasionally and who would not otherwise be counted as part of another housing unit.</p> <p><input type="text"/> <input type="text"/></p>	

Model Housing Needs Assessments, *continued*

Cheyenne River Housing Authority Housing Needs Survey

		#
C3. What is your current housing status? <i>Select one</i>		
<p>I own my own home. <input type="checkbox"/></p> <p>I rent my home / unit. <input type="checkbox"/></p> <p>I live with family or friends on a temporary or permanent basis. <input type="checkbox"/></p> <p>I live in a shelter facility, motel, outdoors or in a vehicle. <input type="checkbox"/></p>		
C4. If you are a homeowner, which of the following programs did you use to purchase your current home? <i>Choose all that apply</i>		
<p>Oti Kaga <input type="checkbox"/></p> <p>Habitat for Humanity <input type="checkbox"/></p> <p>Governor's Home Program <input type="checkbox"/></p> <p>USDA Rural Development <input type="checkbox"/></p> <p>Veterans Affairs <input type="checkbox"/></p> <p>Housing Authority (scattered site/Mutual Help) <input type="checkbox"/></p> <p>HUD 184 <input type="checkbox"/></p> <p>HIP <input type="checkbox"/></p> <p>CRHA Down Payment Assistance <input type="checkbox"/></p> <p>Financing from Local Bank <input type="checkbox"/></p> <p>Financing from Credit Union <input type="checkbox"/></p> <p>None <input type="checkbox"/></p>		
C5. If you are a homeowner, what is the land ownership status of your current home? <i>Select one</i>		
<p>Tribal home site lease/lot <input type="checkbox"/></p> <p>Allotted land <input type="checkbox"/></p> <p>Rental lot <input type="checkbox"/></p> <p>Own deed land/lot <input type="checkbox"/></p> <p>Do not know <input type="checkbox"/></p>		
C6. Choose the type of construction that best describes your current home. <i>Select one</i>		
<p>Single family detached home (traditional construction) <input type="checkbox"/></p> <p>Modular home <input type="checkbox"/></p> <p>Mobile home or trailer <input type="checkbox"/></p> <p>FEMA trailer <input type="checkbox"/></p> <p>Apartment <input type="checkbox"/></p>		
C7. What is the total monthly payment for the entire housing unit? Complete only one field. If the answer is "No payment", please write \$0 in the appropriate field.		
<p>Rent <input type="text"/></p> <p>Mortgage <input type="text"/></p>		
C8. How much is your share of the monthly payment? <i>Select one</i>		
<p>Pay full amount <input type="checkbox"/></p> <p>Some amount, but not the full amount <input type="checkbox"/></p> <p>\$0 <input type="checkbox"/></p>		
C9. If you pay less than the full amount, how much is your share of the monthly payment?		<input type="text"/>
C10. Does your share of the payment include utilities?		
		Yes <input type="checkbox"/>
		No <input type="checkbox"/>

Model Housing Needs Assessments, continued

Cheyenne River Housing Authority Housing Needs Survey

Section D: Income and Employment																																			
<p>D1. What is your current employment status? What is the current employment status of your spouse/partner (if applicable)?</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">You</th> <th style="text-align: center;">Spouse/ partner</th> </tr> </thead> <tbody> <tr> <td>Permanent Full time</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Permanent Part time</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Temporary Full time</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Temporary Part time</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Unemployed</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Retired</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Disabled</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Not applicable (no spouse/partner)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>				You	Spouse/ partner	Permanent Full time	<input type="checkbox"/>	<input type="checkbox"/>	Permanent Part time	<input type="checkbox"/>	<input type="checkbox"/>	Temporary Full time	<input type="checkbox"/>	<input type="checkbox"/>	Temporary Part time	<input type="checkbox"/>	<input type="checkbox"/>	Unemployed	<input type="checkbox"/>	<input type="checkbox"/>	Retired	<input type="checkbox"/>	<input type="checkbox"/>	Disabled	<input type="checkbox"/>	<input type="checkbox"/>	Not applicable (no spouse/partner)	<input type="checkbox"/>	<input type="checkbox"/>						
	You	Spouse/ partner																																	
Permanent Full time	<input type="checkbox"/>	<input type="checkbox"/>																																	
Permanent Part time	<input type="checkbox"/>	<input type="checkbox"/>																																	
Temporary Full time	<input type="checkbox"/>	<input type="checkbox"/>																																	
Temporary Part time	<input type="checkbox"/>	<input type="checkbox"/>																																	
Unemployed	<input type="checkbox"/>	<input type="checkbox"/>																																	
Retired	<input type="checkbox"/>	<input type="checkbox"/>																																	
Disabled	<input type="checkbox"/>	<input type="checkbox"/>																																	
Not applicable (no spouse/partner)	<input type="checkbox"/>	<input type="checkbox"/>																																	
<p>D2. How long have you (and your spouse/partner, if applicable)been with your current employer?</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">You</th> <th style="text-align: center;">Spouse</th> </tr> </thead> <tbody> <tr> <td>Less than 1 year</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>1-2 years</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>3-5 years</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>More than 5 years</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Not employed</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>NA (No spouse/ partner)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>				You	Spouse	Less than 1 year	<input type="checkbox"/>	<input type="checkbox"/>	1-2 years	<input type="checkbox"/>	<input type="checkbox"/>	3-5 years	<input type="checkbox"/>	<input type="checkbox"/>	More than 5 years	<input type="checkbox"/>	<input type="checkbox"/>	Not employed	<input type="checkbox"/>	<input type="checkbox"/>	NA (No spouse/ partner)	<input type="checkbox"/>	<input type="checkbox"/>												
	You	Spouse																																	
Less than 1 year	<input type="checkbox"/>	<input type="checkbox"/>																																	
1-2 years	<input type="checkbox"/>	<input type="checkbox"/>																																	
3-5 years	<input type="checkbox"/>	<input type="checkbox"/>																																	
More than 5 years	<input type="checkbox"/>	<input type="checkbox"/>																																	
Not employed	<input type="checkbox"/>	<input type="checkbox"/>																																	
NA (No spouse/ partner)	<input type="checkbox"/>	<input type="checkbox"/>																																	
<p>D3. What type of employment below best matches your (and your spouse/partner's) current employment? <i>Select one</i></p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th></th> <th style="text-align: center;">You</th> <th style="text-align: center;">Spouse</th> </tr> </thead> <tbody> <tr> <td>Tribal Entity</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Federal Government</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>County, State, or City Government</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Own Farm or Ranch</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Private Sector Employer</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Non-Profit Employer</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>School</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Self-Employed</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>Not Employed</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td>NA (No Spouse/ Partner)</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </tbody> </table>				You	Spouse	Tribal Entity	<input type="checkbox"/>	<input type="checkbox"/>	Federal Government	<input type="checkbox"/>	<input type="checkbox"/>	County, State, or City Government	<input type="checkbox"/>	<input type="checkbox"/>	Own Farm or Ranch	<input type="checkbox"/>	<input type="checkbox"/>	Private Sector Employer	<input type="checkbox"/>	<input type="checkbox"/>	Non-Profit Employer	<input type="checkbox"/>	<input type="checkbox"/>	School	<input type="checkbox"/>	<input type="checkbox"/>	Self-Employed	<input type="checkbox"/>	<input type="checkbox"/>	Not Employed	<input type="checkbox"/>	<input type="checkbox"/>	NA (No Spouse/ Partner)	<input type="checkbox"/>	<input type="checkbox"/>
	You	Spouse																																	
Tribal Entity	<input type="checkbox"/>	<input type="checkbox"/>																																	
Federal Government	<input type="checkbox"/>	<input type="checkbox"/>																																	
County, State, or City Government	<input type="checkbox"/>	<input type="checkbox"/>																																	
Own Farm or Ranch	<input type="checkbox"/>	<input type="checkbox"/>																																	
Private Sector Employer	<input type="checkbox"/>	<input type="checkbox"/>																																	
Non-Profit Employer	<input type="checkbox"/>	<input type="checkbox"/>																																	
School	<input type="checkbox"/>	<input type="checkbox"/>																																	
Self-Employed	<input type="checkbox"/>	<input type="checkbox"/>																																	
Not Employed	<input type="checkbox"/>	<input type="checkbox"/>																																	
NA (No Spouse/ Partner)	<input type="checkbox"/>	<input type="checkbox"/>																																	
<p>D4. What is the length of your commute (one-way)? What is your spouse's length of commute(if you do not commute together)? If you do not have a spouse/partner, please write "N/A" for "Spouse"</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">You</td> <td style="border: 1px dashed black; width: 20px;"></td> <td style="border: 1px dashed black; width: 20px;"></td> </tr> <tr> <td style="text-align: right;">Spouse</td> <td style="border: 1px dashed black; width: 20px;"></td> <td style="border: 1px dashed black; width: 20px;"></td> </tr> </table>			You			Spouse																													
You																																			
Spouse																																			
<p>D5. How many payroll deductions do you currently have in place per pay period? <i>Select one</i></p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">0</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: right;">1</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: right;">2</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: right;">3 or more</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> <tr> <td style="text-align: right;">Not employed</td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>			0	<input type="checkbox"/>	1	<input type="checkbox"/>	2	<input type="checkbox"/>	3 or more	<input type="checkbox"/>	Not employed	<input type="checkbox"/>																							
0	<input type="checkbox"/>																																		
1	<input type="checkbox"/>																																		
2	<input type="checkbox"/>																																		
3 or more	<input type="checkbox"/>																																		
Not employed	<input type="checkbox"/>																																		
<p>D6. What is the total annual income for your family? Please give your best estimate. <i>Include wages/SSU/Disability/VA/TANF/child support/etc for you and your spouse/partner, if applicable</i></p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px dashed black; width: 20px;"></td> </tr> </table>																																			

Model Housing Needs Assessments, continued

Cheyenne River Housing Authority Housing Needs Survey

<p>D7. What are your family's total monthly expenses? Please give your best estimate. <i>Include rent, utilities, groceries, debt payment, and any other monthly bill or payment.</i></p> <table border="1" style="width: 100px; height: 40px; margin-left: auto; margin-right: auto;"></table>		<p>E3. Are you interested in receiving information and help on planning for retirement?</p> <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p>
<p>D8. What is your family's total combined debt? Please give your best estimate. <i>Include home mortgages, lines of credit, personal loans, employer loans, credit cards, auto and student loans, and any other debt</i></p> <table border="1" style="width: 100px; height: 40px; margin-left: auto; margin-right: auto;"></table>		<p>E4. What is your anticipated annual retirement income, including any spousal retirement income? If you don't know, write an "X" in the "Don't know" category for each section.</p> <p>Retirement Plan:</p> <table border="1" style="width: 100px; height: 40px; margin-left: auto; margin-right: auto;"></table> <p>You</p> <table border="1" style="width: 100px; height: 40px; margin-left: auto; margin-right: auto;"></table> <p>Spouse/Partner</p> <table border="1" style="width: 100px; height: 40px; margin-left: auto; margin-right: auto;"></table> <p>Don't know</p> <p>Social Security:</p> <table border="1" style="width: 100px; height: 40px; margin-left: auto; margin-right: auto;"></table> <p>You</p> <table border="1" style="width: 100px; height: 40px; margin-left: auto; margin-right: auto;"></table> <p>Spouse/Partner</p> <table border="1" style="width: 100px; height: 40px; margin-left: auto; margin-right: auto;"></table> <p>Don't know</p> <p>Veterans Pension:</p> <table border="1" style="width: 100px; height: 40px; margin-left: auto; margin-right: auto;"></table> <p>You</p> <table border="1" style="width: 100px; height: 40px; margin-left: auto; margin-right: auto;"></table> <p>Spouse/Partner</p> <table border="1" style="width: 100px; height: 40px; margin-left: auto; margin-right: auto;"></table> <p>Don't know</p> <p>Other:</p> <table border="1" style="width: 100px; height: 40px; margin-left: auto; margin-right: auto;"></table> <p>You</p> <table border="1" style="width: 100px; height: 40px; margin-left: auto; margin-right: auto;"></table> <p>Spouse/Partner</p> <table border="1" style="width: 100px; height: 40px; margin-left: auto; margin-right: auto;"></table> <p>Don't know</p>
<p>Section E: Retirement</p>		
<p>E1. Which of the following best describes your retirement plan or account? <i>Select one</i></p> <p>Employer sponsored plan <input type="checkbox"/></p> <p>Individual plan <input type="checkbox"/></p> <p>Other <input type="checkbox"/></p> <p>None <input type="checkbox"/></p>		<p>E2. When do you plan on retiring? <i>Select one</i></p> <p>Within 1 year <input type="checkbox"/></p> <p>Within 2-5 years <input type="checkbox"/></p> <p>Within 5-10 years <input type="checkbox"/></p> <p>Over 10 years <input type="checkbox"/></p>
<p>Section F: Veteran Status</p>		
<p>F1. Have you ever served on active duty in the U.S. Armed Forces?</p> <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p>		<p>F2. If yes, do you know about the VA Native American Direct Loan Program?</p> <p>Yes <input type="checkbox"/></p> <p>No <input type="checkbox"/></p>

Model Housing Needs Assessments, continued

Cheyenne River Housing Authority Housing Needs Survey

Section G: Homeownership		Select one	
G1. If you were to buy a new home, how many people in your family would live in this new home together?		Which of the following best describes why you chose to move into your current home?	
Adults <input type="checkbox"/> Children 17 years or younger <input type="checkbox"/>		 Location of unit <input type="checkbox"/> Quality of unit <input type="checkbox"/> Affordable rent <input type="checkbox"/> Size of unit <input type="checkbox"/> Only choice I had <input type="checkbox"/>	
G2. Have you tried to purchase a home?			
Yes <input type="checkbox"/> No <input type="checkbox"/>			
G3. If yes, which option best describes the result?		Why are you interested in homeownership?	
<small>Select one</small> I bought a home. <input type="checkbox"/> I did not buy a house because I could not find one I wanted to buy. <input type="checkbox"/> I did not buy a house because I could not get a loan/financing. <input type="checkbox"/> I did not buy a house because I did not have enough down payment money. <input type="checkbox"/> I did not buy a house because I could not get the land to build it on. <input type="checkbox"/> I did not buy a house because the infrastructure costs (roads, water, sewer, electricity) were too expensive. <input type="checkbox"/> I did not buy a house because the lot did not have access to infrastructure (roads, water, sewer, electricity). <input type="checkbox"/> Other <input type="checkbox"/>		<small>Select one</small> Good investment <input type="checkbox"/> Stability <input type="checkbox"/> Freedom to build/change/improve home without landlord approval <input type="checkbox"/> Better location <input type="checkbox"/> Better house <input type="checkbox"/> Other <input type="checkbox"/> Other <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
G4. How easy do you think it is to find affordable, quality housing to buy on the Cheyenne River Reservation?			
<small>Select one</small> Very Easy <input type="checkbox"/> Somewhat Easy <input type="checkbox"/> Somewhat Challenging <input type="checkbox"/> Very Challenging <input type="checkbox"/>		G5. In general, what do you think about buying a house in the next year?	
If you needed to rent a home today, how many choices do you think would be available to you?		<small>Select one</small> I think it is a great time for me to buy a house <input type="checkbox"/> I think it is a good time for me to buy a house <input type="checkbox"/> I think it is a somewhat bad time for me to buy a house <input type="checkbox"/> I think it is a very bad time for me to buy a house <input type="checkbox"/> Don't know <input type="checkbox"/>	
None <input type="checkbox"/> 1-5 <input type="checkbox"/> 6-10 <input type="checkbox"/> More than 10 <input type="checkbox"/>			

Model Housing Needs Assessments, *continued*

Cheyenne River Housing Authority Housing Needs Survey



		Section H: Home Preferences	
G9. If you don't think it is a good time to buy a house within the next year, when do you think it would be a good time to buy a house?		H1. Which of the following type of home would you prefer to buy?	
<i>Select one</i>		<i>Select one</i>	
1-2 years <input type="checkbox"/>		Single-family home traditional construction <input type="checkbox"/>	
2-3 years <input type="checkbox"/>		Single-family home modular construction <input type="checkbox"/>	
3-5 years <input type="checkbox"/>		Mobile home <input type="checkbox"/>	
Over 5 years <input type="checkbox"/>		Duplex/ Townhouse <input type="checkbox"/>	
Never <input type="checkbox"/>			
G10. What are the biggest barriers you see to owning your own home? <i>Please choose your top 5</i>		H2. How many bedrooms would you like to have in your new home?	
Saving enough for a down payment and closing costs <input type="checkbox"/>		<input type="text"/>	
Poor credit history <input type="checkbox"/>		H3. How many bathrooms would you like to have in your new home?	
Low credit score <input type="checkbox"/>		<input type="text"/>	
High existing debts <input type="checkbox"/>			
Not enough income/Ability to make monthly loan payments <input type="checkbox"/>			
Costs/time for maintenance and repairs <input type="checkbox"/>			
Lack of understanding of maintenance and repairs <input type="checkbox"/>			
Lack of information and understanding about the home buying process <input type="checkbox"/>			
Lack of available housing <input type="checkbox"/>			
Lack of builders/ contractors <input type="checkbox"/>			
Inability to get a land lease/lot in desired location <input type="checkbox"/>			
Lack of infrastructure (roads, water, sewer, electricity) <input type="checkbox"/>			
Cost of infrastructure (roads, water, sewer, electricity) <input type="checkbox"/>			
Lack of access to a bank or other financial institution <input type="checkbox"/>			
Other <input type="checkbox"/>			
Other <input type="text"/> <input type="text"/>			

Model Housing Needs Assessments, continued

Cheyenne River Housing Authority Housing Needs Survey



H4. Rate how important each home feature is to you. 1=Not Important 2=Somewhat Important 3=Important 4=Extremely Important

	1	2	3	4
Storm shelter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Central air conditioning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Basement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Two-story home	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yard with sod	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yard with alternative landscaping	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Storage shed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Garage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Carport	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Washer and dryer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative energy sources (wood stove, solar panels)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Multigenerational design	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Note: Multigenerational house plans accommodate different generations under the same roof. Plans often create privacy by dividing bedrooms into separate wings or areas. The kitchen, dining room and other communal areas are generally shared.

H5. Do you need a home that has handicap accessible features (ramp, grab bars, wide hallways, etc)?

Yes
No

Section I: Badger Park

I1. Badger Park is a new housing subdivision being developed by the Cheyenne River Housing Authority. It is located on Tower Road in Eagle Butte and contains over 100 lots. The community will include a variety of housing types and there are lots that have been identified for individual homeownership. CRHA has completed the infrastructure work and the target date for occupancy is Spring 2017. The lot sizes in Badger Park are 125' W x 150' D, which is larger than the average lot in town.

Would you be interested in purchasing a home in the new Badger Park subdivision?

Yes
No

I2. If not, please explain where you would like to buy a house and why.

I3. Which of the following would most likely motivate you to purchase a house located in Badger Park?
Please choose your top 3

- Lots available to build a home
- Flexible home plans
- Ability to design home (exterior and interior)
- Lower infrastructure/ utility hook-up costs
- Streets, sidewalks and street lights
- Close to work
- Close to health care facility
- Close to grocery store/ shopping
- Financial benefit of owning own home
- Safe home and community

Model Housing Needs Assessments, continued

Cheyenne River Housing Authority Housing Needs Survey

Section J: Homebuyer Ed/Credit																																																																										
<p>J1. In preparation for homeownership, please rate the following needs as they apply to your household.</p> <table style="width: 100%; text-align: center;"> <tr> <td>High Need</td> <td>Some Need</td> <td>No Need</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Financial Coaching (How to manage money or credit repair)</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Home loan (Mortgage, Down Payment Assistance, Closing Costs)</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Homeownership Education</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Home maintenance and repairs classes</td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>			High Need	Some Need	No Need	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Financial Coaching (How to manage money or credit repair)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Home loan (Mortgage, Down Payment Assistance, Closing Costs)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Homeownership Education			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Home maintenance and repairs classes			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																										
High Need	Some Need	No Need																																																																								
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																								
Financial Coaching (How to manage money or credit repair)																																																																										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																								
Home loan (Mortgage, Down Payment Assistance, Closing Costs)																																																																										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																								
Homeownership Education																																																																										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																								
Home maintenance and repairs classes																																																																										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																								
<p>J2. Which of the following forms of personal finance do you have (and your spouse/partner, if applicable)? <i>Select all that apply</i></p> <table style="width: 100%; text-align: center;"> <tr> <td>You</td> <td>Spouse</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Checking Account</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Savings Account</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Credit Card</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Debit Card</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>			You	Spouse	<input type="checkbox"/>	<input type="checkbox"/>	Checking Account		<input type="checkbox"/>	<input type="checkbox"/>	Savings Account		<input type="checkbox"/>	<input type="checkbox"/>	Credit Card		<input type="checkbox"/>	<input type="checkbox"/>	Debit Card		<input type="checkbox"/>	<input type="checkbox"/>																																																				
You	Spouse																																																																									
<input type="checkbox"/>	<input type="checkbox"/>																																																																									
Checking Account																																																																										
<input type="checkbox"/>	<input type="checkbox"/>																																																																									
Savings Account																																																																										
<input type="checkbox"/>	<input type="checkbox"/>																																																																									
Credit Card																																																																										
<input type="checkbox"/>	<input type="checkbox"/>																																																																									
Debit Card																																																																										
<input type="checkbox"/>	<input type="checkbox"/>																																																																									
<p>J3. How would you rate your credit score? And, if applicable, your spouse/partner's credit score? <i>Select one</i></p> <table style="width: 100%; text-align: center;"> <tr> <td>You</td> <td>Spouse</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Excellent</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Good</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Fair</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Poor</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Don't know</td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>			You	Spouse	<input type="checkbox"/>	<input type="checkbox"/>	Excellent		<input type="checkbox"/>	<input type="checkbox"/>	Good		<input type="checkbox"/>	<input type="checkbox"/>	Fair		<input type="checkbox"/>	<input type="checkbox"/>	Poor		<input type="checkbox"/>	<input type="checkbox"/>	Don't know		<input type="checkbox"/>	<input type="checkbox"/>																																																
You	Spouse																																																																									
<input type="checkbox"/>	<input type="checkbox"/>																																																																									
Excellent																																																																										
<input type="checkbox"/>	<input type="checkbox"/>																																																																									
Good																																																																										
<input type="checkbox"/>	<input type="checkbox"/>																																																																									
Fair																																																																										
<input type="checkbox"/>	<input type="checkbox"/>																																																																									
Poor																																																																										
<input type="checkbox"/>	<input type="checkbox"/>																																																																									
Don't know																																																																										
<input type="checkbox"/>	<input type="checkbox"/>																																																																									
<p>J4. Have you taken out a loan from a bank/financial institution within the last 5 years? If yes, please answer whether or not it was reported to the credit bureau. If you don't know, please check "Yes - I don't know if it was reported." If no, please check no.</p> <p style="text-align: right;">Select all loans that apply</p> <table style="width: 100%; text-align: center;"> <tr> <td>Yes - it was reported</td> <td>Yes - it was not reported</td> <td>Yes - I don't know if it was reported</td> <td>No</td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Home loan</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Car loan</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Car Title loan</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Payday loan</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Line of Credit</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Personal loan</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Tribal loan</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Four Bands Credit Rebuilder loan</td> <td></td> <td></td> <td></td> </tr> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>			Yes - it was reported	Yes - it was not reported	Yes - I don't know if it was reported	No	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Home loan				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Car loan				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Car Title loan				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Payday loan				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Line of Credit				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Personal loan				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tribal loan				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Four Bands Credit Rebuilder loan				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Yes - it was reported	Yes - it was not reported	Yes - I don't know if it was reported	No																																																																							
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																							
Home loan																																																																										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																							
Car loan																																																																										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																							
Car Title loan																																																																										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																							
Payday loan																																																																										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																							
Line of Credit																																																																										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																							
Personal loan																																																																										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																							
Tribal loan																																																																										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																							
Four Bands Credit Rebuilder loan																																																																										
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																							
<p>J5. Have you defaulted on any loan in the last 5 years?</p> <table style="width: 100%; text-align: center;"> <tr> <td>Yes</td> <td><input type="checkbox"/></td> </tr> <tr> <td>No</td> <td><input type="checkbox"/></td> </tr> </table>			Yes	<input type="checkbox"/>	No	<input type="checkbox"/>																																																																				
Yes	<input type="checkbox"/>																																																																									
No	<input type="checkbox"/>																																																																									
<p>J6. How difficult do you think it would be for you to get a home mortgage today? <i>Select one</i></p> <table style="width: 100%; text-align: center;"> <tr> <td>Very difficult</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Somewhat difficult</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Somewhat easy</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Very easy</td> <td><input type="checkbox"/></td> </tr> <tr> <td>Don't know</td> <td><input type="checkbox"/></td> </tr> </table>			Very difficult	<input type="checkbox"/>	Somewhat difficult	<input type="checkbox"/>	Somewhat easy	<input type="checkbox"/>	Very easy	<input type="checkbox"/>	Don't know	<input type="checkbox"/>																																																														
Very difficult	<input type="checkbox"/>																																																																									
Somewhat difficult	<input type="checkbox"/>																																																																									
Somewhat easy	<input type="checkbox"/>																																																																									
Very easy	<input type="checkbox"/>																																																																									
Don't know	<input type="checkbox"/>																																																																									
<p>J7. How much do you think you can afford each month for a home mortgage payment?</p> <table style="width: 100%; text-align: center;"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																																																																						

Model Housing Needs Assessments, *continued*

Cheyenne River Housing Authority Housing Needs Survey



J8. What would be a reasonable interest rate for a home loan?

Select one

- 0-2%
- 3-5%
- 6-9%
- 10-15%
- Don't know

Thank you for your participation.

Model Housing Needs Assessments, *continued*

Enterprise Community Partners Sample Housing and Business Survey

Introductory Narrative

We are doing a survey for the . The information is part of an effort to create a comprehensive plan for the tribe. Your answers are strictly confidential. The information will not be reported in any way that allows you, your house or your apartment to be individually identified.

(circle one)

Male	1
Female	2

Your Community

1. How long have you lived in this community?

Less than one year	1
1-4 years	2
5-10 years	3
11-20 years	4
21 years or more	5
Not sure or no response	9

2. What are the three things you like most about living in this community?

(If they lived in the same place for five or more years:)

3. Five years ago, did you live

In some other community	1
Somewhere else in:	2
Outside of:	3
Not sure or no response	9

4. Compared with five years ago, how would you rate your community as a place to live? Is it....

A better place to live today?	1
A worse place to live today?	2
About the same?	3
Not sure or no response	9

Retail Services

5. Would you say the majority of the stores in your community serve . . .

(Read List)

Tribal residents

Yes	No	Not applicable
1	2	9

People from other communities

Yes	No	Not applicable
1	2	9

6. Compared to five years ago, do the stores serve the community . . .

A better place to live today?	1
A worse place to live today?	2
The same	3
Did not live here 5 years ago	5
Not sure or no response	9

7. What type of retail would you like to see added to your community?

Grocery	1
Pharmacy	2
Automotive service (includes gas stations)	3
Clothing	4
Convenience	5
Household goods and appliances	6
Not sure	7
Other	

Model Housing Needs Assessments, *continued*

Enterprise Community Partners Sample Housing and Business Survey

Community Involvement

8. Have you ever wanted to change something or address a problem in your community?

No	1
Yes	2
Not sure or no response	9

9. Have you ever contacted anyone about changing something or addressing a problem?

No (Go to Question 11)	1
Yes	2
Not sure or no response	9

10. Who have you contacted?

Tribal Council	1
Indian Housing Authority	2
Other (specify)	3
Not sure or no response	9

11. Why have you not contacted anyone?

Lack of time	1
Wouldn't make a difference	2
Not interested or feel it's not important	3
Tried it, but frustrated with lack of results	4
Didn't know who to contact	5
Language or cultural barriers	6
Not sure or no response	9

12. Do you feel you know enough about the development plans for your community?

No	1
Yes	2
Not sure or no response	9

13. In what ways would you like to get information about development plans in your community?
Would you like to get information through:

Newspaper articles
Yes No Not applicable
1 2 9

Community meetings
Yes No Not applicable
1 2 9

Meetings at tribal offices
Yes No Not applicable
1 2 9

Neighborhood newsletters
Yes No Not applicable
1 2 9

Mail or flyers
Yes No Not applicable
1 2 9

Word of mouth
Yes No Not applicable
1 2 9

Other
Yes No Not applicable
1 2 9

14. If a group were organized, would you be interested in working with that group to advise on physical and community improvements?

Yes, I would be interested 1
No, not interested 2
Not sure or no response 9

(If yes)
How often do you think you would attend meetings of this group?

Weekly 1
Monthly 2
Four times per year 3
Less than four times per year 4
Not sure or no response 9

Model Housing Needs Assessments, *continued*

Enterprise Community Partners Sample Housing and Business Survey

Housing

15. Do you think there is a need for more affordable housing opportunities for residents in your neighborhood?

- Yes _____ 1
No (Skip to Question 18) _____ 2
Not sure or no response _____ 9

16. In your neighborhood, which is needed more –rental housing or homeownership opportunities?

- Rental housing _____ 1
Homeownership _____ 2
Both are equally needed _____ 3

17. If you could afford to buy a house anywhere you like, would you buy . . .

- In your community (Skip to Question 21) _____ 1
Some other area on your reservation _____ 2
Outside of the reservation altogether _____ 3
Not sure or no response (Skip to Question 21) _____ 9

18. Why would you buy outside of the tribal community?
(Do NOT read list.)

- Affordability _____ 1
Location _____ 2
Availability _____ 3
Safety or crime _____ 4
Job or employment _____ 4
Other, not sure or no response _____ 9

19. Are you aware of any programs that help you buy a home of your own?

- Yes _____ 1
No _____ 2
Not sure or no response _____ 9

20. How much does your household pay in rent or mortgage each month?

- \$150 or less _____ 1
\$151 - 300 _____ 2
\$301 - 600 _____ 3
\$601 - 900 _____ 4
\$901 - 1,200 _____ 5
\$1,201- 1,500 _____ 6
More than \$1,500 _____ 7
Not sure or no response _____ 9

21. Does the housing authority own your housing?

- Yes _____ 1
No _____ 2
Not sure or no response _____ 9

22. If you are renting, does your rent include utilities?

- Yes _____ 1
No _____ 2
Not sure or no response _____ 9

23. If you are renting, is your rent subsidized?
(For example: Section 8, Section 7087 or rent vouchers)

- Yes _____ 1
No _____ 2
Not sure or no response _____ 9

24. **(Homeowners only)** Are you aware of any programs to help you finance home repairs?

- Yes _____ 1
No _____ 2
Not sure or no response _____ 9

Model Housing Needs Assessments, continued

Enterprise Community Partners Sample Housing and Business Survey

25. What type of building do you live in?

Single family house	1
Two-family house or duplex	2
Three or more family house (attached)	3
Building with four or more apartments	4
Not sure or no response	9

26. Is your home in need of repairs or improvements?

Yes	1
No	2
Not sure or no response	9

Employment

27. Which of the following best describes your situation?

Working full time (Skip to Question 30)	1
Working part time (Skip to Question 30)	2
Own business (Skip to Question 30)	3
A homemaker (Skip to Question 34)	4
Unemployed	5
Retired (Skip to Question 34)	6
Not sure or no response	9

(If unemployed)

28. How long have you been out of work?

Less than 6 months	1
6 - 12 months	2
More than 12 months	3
Not sure or no response	9

29. What are the reasons for your current unemployment?

Need G.E.D. (high school diploma)	1
Need job or skill training	2
Lack of transportation	3
Need child care	4
Taking care of parents	5
Limited job opportunities	6
Disability	7
Other	9

(If working)

30. Do you work . . .

In your immediate neighborhood	1
In the city of:	2
In:	3
Not sure or no response	9

31. How do you usually get to work?

Car, van, truck, motorcycle	1
Bus, train	2
Taxicab	3
Bicycle	4
Walk	5
Work at home	6
Other	7
Not sure or no response	9

32. What kind of business or industry do you work in? (For example, college, hospital, government, manufacturing plant, research and development, restaurant, retail store).

Model Housing Needs Assessments, *continued*

Enterprise Community Partners Sample Housing and Business Survey

40. Do you speak a language other than English at home?

Yes	1
No (Skip to Question 43)	2
Not sure or no response	9

41. If so, what language?

Cambodian	1
Portuguese	5
Chinese	2
Spanish	6
Creole (Haitian)	3
Native American	7
French	4
No response	9
Other	

42. What is the highest grade or year of school you have completed?

Eighth grade or less	1
Some high school	2
High school grad or GED	3
Some college or technical school	4
College or technical school grad	5
Post grad or professional degree	6
No response	9

43. Did anyone in your household drop out of school?

Yes	1
No	2
Not sure or no response	9

44. If so, did they return to complete their studies?

Yes	1
No	2
Not sure or no response	9

45. Do you have any children enrolled in school?

Yes	1
No	2
Not sure or no response	9

46. What is your age (within the following ranges)?

15-19 years	1
20-34 years	2
35-44 years	3
45-54 years	4
55-64 years	5
65+ years	6
No response	9

47. How many people in your household are in the following age groups?

0-4 years:	1
5-14:	2
15-19:	3
20-34:	4
35-44:	5
45-54:	6
55-64:	7
65+ years:	9
No response:	

48. For household members who are age 65 or older, is there a need for assisted-living services?

Yes	1
No	2
Not sure	3
No response	9

Model Housing Needs Assessments, *continued*

Enterprise Community Partners Sample Housing and Business Survey

49. Does anyone in your household receive Medicare or Medicaid?

- | | |
|-------------------|---|
| Yes | 1 |
| No | 2 |
| If yes, how many? | |

50. Are any members of your household in need of supportive social services (*alcohol treatment, drug treatment, domestic violence, family planning, etc.*)?

- | | |
|-------------------|---|
| Yes | 1 |
| No | 2 |
| If yes, how many? | |

51. What type of treatment is needed?

- | | |
|-------------------|---|
| Alcohol | 1 |
| Drug | 2 |
| Domestic violence | 3 |
| Family planning | 4 |
| Other: | |

52. How many people live in your household?
Include everyone staying or visiting who has no other home. Include family members away at school or military service.
Number of people:

53. Last year, what was the total yearly income of your **household** from all sources?

- | | |
|-------------------|----|
| \$6,000 or less | 1 |
| \$6,000 - 11,000 | 2 |
| \$11,001 - 15,000 | 3 |
| \$15,001 - 20,000 | 4 |
| \$20,001 - 25,000 | 5 |
| \$25,001 - 30,000 | 6 |
| \$30,001 - 35,000 | 7 |
| \$35,001 - 40,000 | 8 |
| \$40,001 - 45,000 | 9 |
| \$45,001 - 50,000 | 10 |
| \$50,001 or more | 11 |

Model Housing Needs Assessments, *continued*

Enterprise Community Partners Sample Housing and Business Survey

33. What kind of work do you do? (For example, registered nurse, assembler, sales clerk, bookkeeper) (If the respondent works more than one job, use the one job worked most.)

34. What kind of job skills do you currently have?

Computer	1
Construction	2
Accounting	3
Teaching	4
Law	5
Retail	6
Administrative or secretarial	7
Health care	8
Child care	9
Technical (automotive)	10
Finance (banking)	11
Not sure	12
Other	

35. Last year was your income derived from:

Wages or salaries (including own business)	1
Social Security, pensions, annuities, or other retirement income	2
Public assistance such as AFDC, or welfare	3
Scholarships, stipends, support from family or friends	4
Child support or alimony	5
Other	6
Not sure or no response	9

Household

36. How long have you lived at your current address?

Less than one year	1
1 - 5 years	2
6 - 10 years	3
11 - 20 years	4
21 years or more	5
Not sure or no response	9

37. How would you describe your household? Are you...

A couple with children	1
A couple without children	2
A single parent	3
Roommates	4
A single person living alone	5
Two or more families sharing living quarters	6
Not sure or no response	9

38. Are you . . .

American Indian, Eskimo, or Aleutian	1
Black	2
Asian or Pacific Islander	3
White	4
Not sure or no response	9

39. Are you of Spanish or Hispanic origin?

Yes, Mexican-American or Chicano	1
Yes, Puerto Rican	2
Yes, Cuban	3
Yes, Central American	4
Yes, other Spanish or Hispanic	5
No, (not Spanish or Hispanic)	6