



Application for Dress For Success® Referral

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Home Phone: () _____ Email Address: _____

Cell Phone: () _____ Student ID #: _____

Total # of people in household (self, spouse, & dependents): _____ Number of dependents: _____

Education

Program of Study: _____

Month/Year of Graduation: _____ / _____ Check all that apply: Degree Certificate Upgrade

Are you a Worker Retraining student? YES NO Are you a WorkFirst student? YES NO

Financial Need

Please list your financial resources:

Job Income/Month: \$ _____ Social Security Benefits: \$ _____

Spouse's Income/Month: \$ _____ Child Support: \$ _____

Unemployment Benefits: \$ _____ Veteran's Benefits: \$ _____

Additional/Other Income: \$ _____

Total Monthly Resources: \$ _____

Please provide a copy of your most recent pay stub

Job Readiness

Please list jobs for which you are applying:

Company: _____ Interview Date: _____ / _____ / _____
Job Title: _____ Phone Number: (_____) _____
Address: _____

Company: _____ Interview Date: _____ / _____ / _____
Job Title: _____ Phone Number: (_____) _____
Address: _____

Company: _____ Interview Date: _____ / _____ / _____
Job Title: _____ Phone Number: (_____) _____
Address: _____

Signature

I certify that my answers are true and complete to the best of my knowledge.

Signature: _____ Date: _____

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