

**APPLICATION REVIEW  
REQUEST FOR INFORMATION FORM**

**Date:** \_\_\_ / \_\_\_ / \_\_\_

**Applicant's Name:** \_\_\_\_\_

**Reviewer's Name:** \_\_\_\_\_

The Michigan IDA Program is in need of additional information in order to determine your eligibility to participate in the program. Please bring the following documents to our office at your earliest convenience:

- \_\_\_\_\_ **Current Driver's License or Identification Card**
- \_\_\_\_\_ **Social Security Card**
- \_\_\_\_\_ **Most recent payroll check stub**
- \_\_\_\_\_ **Verification of income for the 12 months prior to date of application**
- \_\_\_\_\_ **1099 forms (if self-employed)**
- \_\_\_\_\_ **Prior Year U.S. Income Tax Returns for all members of your household**
- \_\_\_\_\_ **W-2 forms from all jobs for potential participant**

As soon as we receive the documentation listed above, we can finish processing your application. If you have any questions or need additional information, please contact \_\_\_\_\_ at \_\_\_\_\_

Thank you and we look forward to working with you!