

**ISLAND HOUSING TRUST
PERSONAL DATA SHEET
FOR APPLICANTS FOR WORKFORCE HOUSING**

Applicant Name: _____

Spouse/Significant Other: _____

Address: _____

E-mail Address: _____

Telephone Daytime: _____ **Evening:** _____

Number of dependents _____

Age(s): _____

Children attend what school(s)? _____

Applicant places of employment for past 5 years:

Applicant current employer, address, and name of contact person:

Places of spouse/significant other employment for past 5 years:

Spouse's/significant other's current employer, address, and name of contact person:

Applicant date of Birth (optional): _____

Do you or your spouse/significant other currently own or partly own property? Yes _____ No _____

Type: _____ Location: _____

Value: _____ Mortgage _____

Are you or your spouse/significant other currently approved for any type of land/house loan? Yes _____ No _____

Amount \$ _____ Name of Institution: _____

Contact Name: _____

Down payment contribution, if any? \$ _____

Gross annual household income \$ _____

Gross annual income of spouse/significant other \$ _____

Please attach copies of your most recent paystubs or other proof of the amount of your earnings and sources of income.

Other comments or explanations:

Confidential

Confidential Disclosure Agreement:

WHEREAS the Applicant has provided to Island Housing Trust certain personal information related to this Application for Qualification; and

WHEREAS Island Housing Trust has required submission of the information contained on the attached Personal Data Sheet, including certain information pertaining to the Applicant's qualification for bank financing;

NOW THEREFORE, in consideration for the mutual purposes of the Applicant and Island Housing Trust, the parties agree as follows:

1. Disclosure. The Applicant agrees to disclose and the Island Housing Trust agrees to receive certain Confidential Information.
2. Confidentiality. Island Housing Trust agrees to use its best efforts to prevent and protect the Confidential Information, or any part thereof, from disclosure to any person other than the employees of Island Housing Trust, members of the Board of Directors of Island Housing Trust or any of the Board's committees or subcommittees, and certain consultants having a need for disclosure in connection with Island Housing Trust's authorized use of the Confidential Information.
3. Limits on Confidential Information. Island Housing Trust shall have no obligation with respect to such information where the information:
 - (a) was known to Island Housing Trust prior to receiving any confidential information from Applicant;
 - (b) has become publicly known through no wrongful act of Island Housing Trust;
 - (c) was received by Island Housing Trust without breach of this Agreement from a third party without restriction as to use and disclosure of the information;
 - (d) was ordered to be publicly released by the requirement of a government agency.
4. Ownership of Confidential Information. Applicant agrees that all Confidential Information included in this Application shall remain the property of Island Housing Trust and that Island Housing Trust may use such Confidential Information for purposes related to the determination of the qualifications of the Applicant pursuant to this Application.

Signed: _____
Applicant

_____ for Island Housing Trust

Date: _____