



Consumer Credit Counseling Service
of Northeastern Iowa

(800) 714-4388

cccsia.org

General Information Worksheet

Applicant's Information			Spouse's Information		
Last Name:	First Name:	Middle Initial:	Last Name:	First Name:	Middle Initial:
Date of Birth:			Date of Birth:		
Present Address					
Address:			City:	State:	Zip:
Primary Phone:	Email Address:		Number of Children:	Ages of Children:	
Applicant's Employer Information			Spouse's Employer Information		
Employer Name:			Employer Name:		
Employer Address:			Employer Address:		
Position:		Phone:	Position:		Phone:
Monthly Gross Pay:	Monthly Net Pay:		Monthly Gross Pay:	Monthly Net Pay:	
Other Income					
Child Support:	Part Time:	Social Security:	Other:	Total:	

Statement of Counseling Services

Privacy Notice

Agency-Client Policies