Center for HomeOwnership
educating · connecting · building wealth

Referral Form

FAX: (336) 773-1235

Email: info@centerforhomeownership.org

Date: _____

Referred by: _____

Email Address: _____

FAX Number: _____

This form introduces _____

(Client Name)

Address _____

Phone Number _____

Please provide the necessary education and/or counseling services:

- Pre-purchase Counseling (includes credit report review & analysis, budget review and action plan. Client pays fee once, no charge for follow-up appointments)
- Homebuyer Education

We have provided your client, _____ on _____

(Client Name) (date)

with the services requested and your client is now:

- Mortgage Ready
- Near Ready 1-3 months
- Short-term 3-6 months
- Long-term 9-12 months
- Client didn't respond within 30 days

Counselor Comments:

Referral form will be emailed or faxed to your attention once the client has received services and/or when it is identified that the client in Near Ready.

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Improving Lives Through Financial Education and Coaching