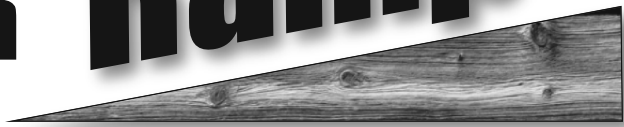


Access North Ramp

Project Application



Return to : 1309 East 40th St., Hibbing, MN 55746
(218) 262-6675 • Fax (218) 262-6677 • info@accessnorth.net

Name: _____ Date: _____

Address: _____ City _____, MN Zip _____

County _____ Phone _____

Date of Birth: _____ Gender ___ M ___ F Veteran ___ Y ___ N

Disability _____

Are You:

_____ White (Not Hispanic) _____ Black (Not Hispanic) _____ Hispanic
_____ American Indian or Alaskan Native _____ Asian or Pacific Islander

Do you _____ Rent _____ Own your home

Household Composition: Please indicate all persons living in your home.

Name	Date of Birth	Relation
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Why Do You Need A Ramp? _____



Access North
Center for Independent Living
of Northeastern Minnesota

www.accessnorth.net

Rev. 2/16

