NORTH MEMORIAL HEALTH

MAPLE GROVE HOSPITAL

Guarantor / Account #:

Financial Assistance Application – Shelter Statement

If the Primary Applicant and/or Family Members living in the household are applying for North Memorial Health (NMH) financial assistance and there is no income to report on the Financial Assistance Application, a Shelter Statement of support must be completed and attached to the Financial Assistance Application. Please complete and return with the Financial Assistance Application.

1. PRIMARY APPLICANT: as shown on the Financial Assistance Application. All boxes must be filled in.

First Name	M.I.	Last Name	Date of Birth	Sex ☐M ☐F	Marital Status
Address			City	State	Zip Code
Social Security Number			Home Phone		Other Phone

2. PRIMARY APPLICANT STATEMENT:

I (We) have no income to report on the financial assistance application, and (please select one):

☐ **I (We) are providing food and shelter from the assets that are listed on the financial assistance application. Skip to section #4.**

☐ **Another person or persons are providing food and shelter. Complete section #3.**

3. PERSON PROVIDING SHELTER:
The primary applicant, and family members living with the primary applicant (if any), are currently unemployed and I provide the means of their support. They live with me at:

Address	City	State	Zip Code

Signature: _____   Date: _____
Print Name: _____   Contact Phone Number: _____
Relationship to Primary Applicant: _____

Witness Signature: _____   Date: _____
Print Name: _____

4. PRIMARY APPLICANT SIGNATURE:

I acknowledge that the information of this application is true and correct to the best of my knowledge. I understand that misrepresentation of the information on this application could result in denial of your financial assistance application request.	
DATE:	**PRIMARY APPLICANT'S SIGNATURE:** **X**

If you are need of assistance with completing the Shelter Statement, please contact NMH the appropriate phone number below:

North Memorial Health/Maple Grove Hospital
(763)581-4980 or (866) 358-2644

North Memorial Transportation
(763)581-9930 or (800)535-6720

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